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ABSTRACT

The report assesses the status of education of intellectually handicapped students in Western Australia. An introductory section considers definitions, prevalence, and labeling issues. The historical development (1890-1980) of special education of the intellectually handicapped is reviewed. The administration of special education programs in primary and secondary schools is addressd in terms of such issues as student records, teacher qualifications, and curriculum. Preschool education for the intellectually handicapped and the education for severely and profoundly retarded children are examined in separate chapters. Recommendations are made throughout the text. (CL)

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THE EDUCATION OF INTELLECTUALLY HANDICAPPED CHILDREN IN WESTERN AUSTRALIA

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WESTERN AUSTRALIAN COUNCIL FOR SPECIAL EDUCATION

EDUCATION OF INTELLECTUALLY HANDICAPPED CHILDREN IN WESTERN AUSTRALIA

Report to the Minister for Education

The Western Australian Council for Special Education

December 1979

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WESTERN AUSTRALIAN COUNCIL FOR SPECIAL EDUCATION

The Council was established by the Minister for Education in October 1974 to advise and report on all aspects of special education.

The terms of reference for the work of the Council include the following:

1. Advise and assist in the development of tertiary education programmes.
2. Advise on and commission research and evaluation in the area of special education.
3. Rationalise total State effort within the field of special education.
4. Provide a forum for debate in the field of special education.
5. Provide a liaison between professionals and between profession and community.
6. Assist and advise on programme development.
7. Provide professional arbitration in the field of special education.
8. Report and advise the Government on matters relating to special education.

The present members of the Council are :

Dr D.A. Jecks, Director, Churchlands College of Advanced Education (Chairman).

Dr H.J. Blackmore, Psychiatrist Superintendent, Community Psychiatric Division, Western Australian Mental Health Services.

Dr P.G. Cole, Senior Lecturer in Education, University of Western Australia.

Dr A. Little, Associate Professor of Psychology, University of Western Australia.

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CHAPTER ONE

INTRODUCTION

1.1 The brief given to the Western Australian Council for Special Education which led to this report was contained in a letter from the Minister for Education which included the following statement.

> I would therefore request that your Council might, as its next task, devote itself to the question of what should be the Government's policy in relation to providing for the needs of all intellectually handicapped, including those in Day Activity Centres conducted by the Slow Learning Children's Group, Mental Health Services and other bodies. While the Council should feel free to extend its terms of reference in this regard I would suggest that the following issues require consideration :
>
> 1. the role of authorities other than the Education Department in providing appropriate programmes for mentally handicapped children including those at the pre-school level,
>
> 2. the extent to which separate schools should be provided for children whose mental handicaps are of varying severity, and
>
> 3. the extent to which the provision of multi-school campuses such as that provided at Willetton for physically handicapped children should be used for mentally handicapped children.

1.2 When the Minister's letter was received late in 1977, the Council was just completing its report *The Education of Visually Handicapped Children in Western Australia* and continued with this task early in 1978. However, by April 1978 the Council was free to commence its investigation of the educational needs of intellectually handicapped students,

1.3 The Council decided to invite submissions from individuals and organisations interested in the education of the intellectually handicapped, and following advertisements placed in mid 1978, there was a good response from professional and public groups and interested persons. In conducting its investigation the Council held discussions with representatives from various organisations and visited a wide range of the facilities in Western Australia which cater for the education and care of the intellectually handicapped. Some Council members visited similar facilities in New South Wales and Queensland. In addition, the Council requested information from various individuals, agencies, schools and tertiary institutions. A list of individuals and organisations who assisted the Council is set out in Appendix II. The Council is appreciative of the high level of cooperation it received and is pleased to report that all those approached contributed fully and willingly.

1.4 The Council endorses the principle that as many handicapped students as possible should be educated in their local schools. This principle has been fully expounded in previous Council reports. The Council also supports the statement by the Australian Special Education Heads in the Report of their Second Biennial Conference in 1976, that there should be "maximum useful association between handicapped children and others consistent with the interests of both." *(Second Conference of Special Education Heads, 1976, p.5).*

1.5 The term *normalisation* appears to have first been used in Denmark and was soon adopted in the United States of America where one of the strongest advocates of the principle has defined it as "the utilisation of means which are as culturally normative as possible in order to establish and/or maintain personal behaviours and characteristics which are as culturally normative as possible " (Wolfensberger, 1972). The use of the term *normalisation* in relation to intellectually handicapped persons has on occasions led to the expectation that such persons can literally *become normal.* However, this is not the accepted meaning of the term. Council prefers the emphasis in the Victorian Report in which it was stated that *normalisation*

> implies a movement towards what is normal, so that even the smallest change for a profoundly retarded person towards what is accepted as customary in his society is a part of the normalisation process. The principle applies far more to attitudes - and to all other factors that affect human relationships - than to any major change in the mental capacity of the retarded person *(Report of the Victorian Committee on Mental Retardation, 1977, p.3)*.

This definition is consistent with the position taken by the Director of the Western Australian Mental Health Services, when he stated :

> To many people it will seem as if our objective is to make normal the intellectually handicapped, and clearly that is not possible. What we are trying to make 'normal' are community attitudes towards the retarded and the life of the handicapped within the community (F. Bell, *Services for the Intellectually Handicapped, 1977, p.2)*.

1.6 Contemporary definitions of education encompass a wider range of objectives than those traditionally associated with formal schooling and acknowledge that many agents other than teachers within the school system have an important part to play in educating children. *The Report of the United Kingdom Committee of Enquiry into the Education of Handicapped Children and Young People* proposed two goals for education :

1. to enlarge a child's knowledge, experience and imaginative understanding, and thus his awareness of moral values, and capacity for enjoyment;

2. to enable a child to enter the world after formal education is over as an active participant in society and a responsible contributor to it, capable of achieving as much independence as possible *(The Warnock Report : The Report of the United Kingdom Committee of Enquiry into the Education of Handicapped Children and Young People, 1978, p.6)*.

Thus the long-term goals are the same for all children and although some may approach the first only by small steps and never fully achieve the second, the purpose of education should be to help each child make what progress is possible towards these goals.

1.7 In this report it is clearly shown that in Western Australia there is a relatively large group of students who fall into the categories of *dull-normal, borderline handicapped* and *intellectually handicapped.* Council believes that it is most important that all educational personnel should recognise the particular problems of these children, the great majority of whom are, and will properly remain, in their local regular schools.

1.8 The remainder of this report has been developed as five chapters each of which deals with a particular area.

Chapter Two : The Scope of the Problem, which includes a definition of terms, a discussion of incidence and matters related to school placement and labelling.

Chapter Three : Historical Development, which reviews the period 1890-1980 and establishes the fact that almost all development related to the education of intellectually handicapped students in Western Australia has occurred since 1945.

Chapter Four : The Administration of School Programmes for Intellectually Handicapped Pupils, which reviews special education in primary and secondary schools over a broad range of issues.

Chapter Five : Preschool Education for Intellectually Handicapped Children, which deals with preschool education and outlines particular problems related to the assessment, placement and education of very young intellectually handicapped children.

Chapter Six : Education of Severely and Profoundly Retarded Children, which deals with the education of those intellectually handicapped children who are not at present attending Education Department schools. Among other issues this chapter points to present difficulties related to funding from various commonwealth government departments.

For the convenience of the reader, Appendix I contains a summary of recommendations.

1.9 During its investigation the Council has become aware that the education of intellectually handicapped children involves, and will continue to involve, the cooperation of a range of

professional people and government and voluntary agencies. In the report, several recommendations relate to improving cooperation and are intended to develop communication, coordination and rationalisation. As an example of cooperation between two major government departments in the United Kingdom, Appendix III contains a circular related to the coordination of services for children under five. This circular was signed and issued jointly by the Department of Health and Social Security and by the Department of Education and Science on 25 January 1978.

1.10 Members of the Council express the sincere hope that this report will lead to improved educational services for intellectually handicapped persons.

CHAPTER TWO

THE SCOPE OF THE PROBLEM

2.1 There is much confusion in the public mind about *intellectual handicap* because of the number of terms used to describe the disorder. *Intellectually handicapped* persons have been labelled as *slow learners*, *intellectually deficient*, *subnormal* and *retarded*. One of the purposes of this chapter is to clarify the use of these terms.

2.2 In Western Australia the Mental Health Act (1962-1975) refers to *intellectually defective* persons, although the division of Mental Health Services set up in 1964 to provide for these persons was initially called the Mental Deficiency Division. In line with Commonwealth Government practice (Drummond, 1978), the name of the division has since been changed, and the section that cares for these persons is now called the Division for the Intellectually Handicapped.

2.3 Prior to 1976 the Education Act made reference to *mentally deficient* and *mentally defective* children. When the Act was amended in 1976 these expressions were dropped and the terms *mental disorder* or *disability* took their place. The terms were not defined in either the original or amended versions of the Act.

2.4 The Council is of the opinion that the most useful and meaningful term to describe this particular disorder is *intellectual handicap*. However, Council also considers that the terms *borderline handicap* and *dull-normal* have some value, particularly with reference to those pupils who find difficulty adjusting to the intellectual demands of schools,

but who do not normally require full-time special education services. The definitions of *intellectual handicap*, *borderline handicap* and *dull-normal* are explained in some detail in the next section of this report.

Definitions and Prevalence Estimates

2.5 In this report the term *intellectual handicap* will refer to persons of well below average intellectual competence and social maturity. These persons normally require full-time special education, habilitation services or hospital care.

2.6 The term *borderline handicap* will refer to individuals of below average intellectual competence and social maturity. Such persons may require special education for part of their school programme, but rarely require intensive habilitation services or full-time medical care.

2.7 Finally, we make reference to the *dull-normal* group who are of low average intelligence and social maturity. While in school they occasionally require special education services. Such children adjust reasonably well in the regular school situation and are never officially classified as handicapped.

2.8 Intellectual competence is defined as the ability to function efficiently in a wide variety of problem solving situations. Social maturity, in the present context, is defined in terms of degrees of personal independence and social responsibility.

2.9 It is important to distinguish between the terms *learning disability* and *intellectual handicap*. The term *learning disability* is broadly synonomous with the notion of *underachievement*. The *learning disabled* child is of average or above average intelligence, but achieves well below potential on measures of school attainment. The *learning disabled* child has a *specific disability* (in reading, language

or in some other skill area) but has the intelligence (or potential) to achieve at a higher level in the specific area of deficit. The *learning disabled* child is often in need of *remedial teaching*, defined as intensive individual tutoring in small groups to help offset major specific learning problems; or in need of *corrective instruction*, defined as special instruction provided in the normal classroom group to help offset minor learning problems.

2.10 The *intellectually handicapped* student requires *adapted* instruction; that is, a programme of work that is modified and matched to the student's level of intellectual capacity. The curriculum of the regular grade is usually too complex for the *intellectually handicapped* child and all subject areas are normally made more concrete to suit the abilities of the particular student.

2.11 Most authorities assume that intelligence is normally distributed and much of the research supports this view (Dingman and Tarjan, 1960). In ordinary language this means there are few very intelligent persons and few individuals of well below average intelligence, with the intelligence test scores of most persons clustering around the average. Figure 2.1 shows the model for the normal distribution of intelligence test scores and as can be seen the greatest proportion of scores is grouped around the average with few scores at the extremes. The lightly shaded area in the figure denotes the proportion of persons of well below average intelligence. Approximately 2.3 per cent of persons fall into the well below average category.

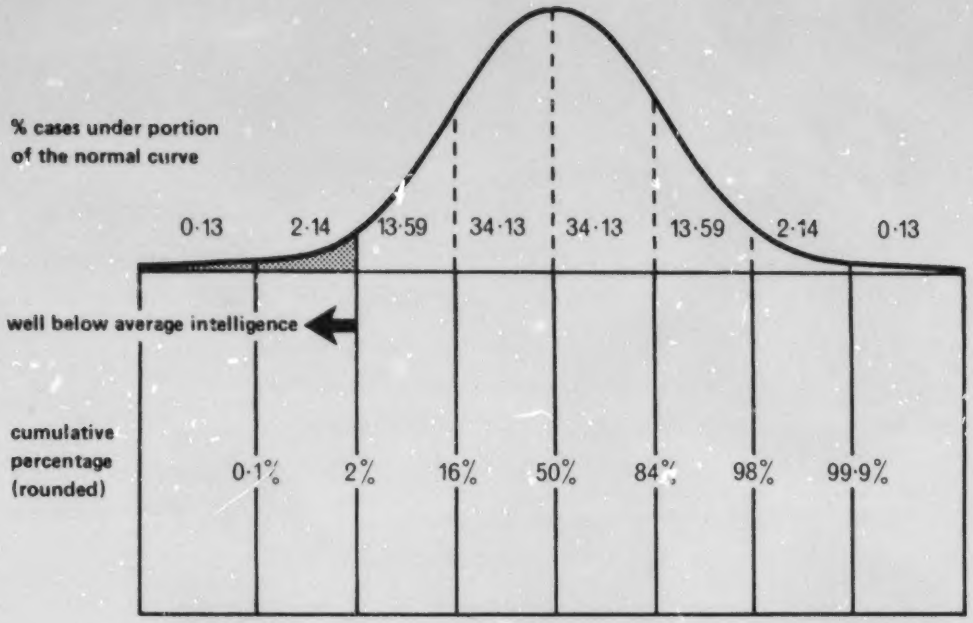

Figure 2.1: Model for the Normal Distribution of Intelligence

2.12 However, the model and the above figures can be misleading because they are based on intelligence test scores only. The figures need to be amended to take into account the social maturity dimension included in our definition. As already indicated persons diagnosed as *intellectually handicapped* must be well below average on measures *both* of intelligence and social maturity. When both factors are considered the best estimate of *intellectual handicap* is found to be 0.98 per cent (Silverstein, 1973) which is well below the 2.3 per cent estimate stated above. The figure is lower because many persons who fall into the well below average range of intelligence are somewhat more competent on social maturity scales (Robinson and Robinson, 1976).

2.13 The prevalence of persons in the *borderline handicapped* category is somewhat higher. Again, measured intelligence and social maturity are considered in estimating prevalence. The *borderline handicapped* are below average on both social maturity and intelligence test measures, but are not as deficient as the *intellectually handicapped*. Silverstein

(1973) estimates that 8.78 per cent of the total population is in this category.

2.14 The *dull-normal* comprise the 10 per cent of persons above this group who perform at low normal levels on IQ and social maturity measures. If we combine the three groups to estimate the number of *intellectually handicapped, borderline handicapped* and *dull-normal persons* we obtain a figure of 19.76 per cent. The prevalence figures for the three groups are summarised in Table 2.1. A prevalence estimate of 19.76 per cent may appear high, but it needs to be pointed out that relatively few in this large group are *intellectually handicapped* and require full-time special education services.

Table 2.1

Hypothetical State-wide Prevalence of Intellectually Handicapped, Borderline Handicapped and Dull-normal Persons, Based on a Population Correlation of 0.80 between IQ and Adaptive Behaviour.

Intellectually handicapped	0.98 per cent
Borderline handicapped	8.78 per cent
Dull-normal	10.00 per cent
Total	19.76 per cent

After Silvertstein (1973)

2.15 Based on evidence from several sources (Dingman, 1959, Mercer, 1973, and Tarjan, Wright, Eyman and Keenan, 1973) we feel confident that the figures presented in

Table 2.1 are a reasonable estimate of the prevalence of *intellectually handicapped, borderline handicapped* and *dull-normal* persons in our community. Even so, there are several complicating factors that need to be considered in interpreting these figures. To begin with it must be stressed that not all of the students in special classes and special schools can be classified as *intellectually handicapped.* Many of these are *borderline handicapped* or *dull-normal* students who have had extreme difficulty adjusting in normal classes in the regular schools. Most have done poorly in mastering the skills of literacy and numeracy. Research indicates that *dull-normal, borderline handicapped* and *intellectually handicapped* pupils vary greatly in their level of educational attainment and in their capacity to adjust to the regular school environment (Smith, 1974).

2.16 It must also be stressed that not all *intellectually handicapped* children are enrolled in the school system. Some of the more handicapped children are cared for in hospitals, institutions and day activity schools supervised by the Division for the Intellectually Handicapped and the Slow Learning Children's Group. Some have multiple handicaps and are cared for by other agencies. For example, some physically handicapped children are also *intellectually handicapped* and are cared for in facilities for the physically handicapped.

2.17 A third factor complicates the issue. Incidence figures are very much affected by age. Children are more likely to be labelled *intellectually handicapped, borderline handicapped* or *dull-normal* than adults (Mercer, 1973). It is while at school that the greatest demands are made on cognitive ability. It is also true that children from underprivileged homes and from

the lower socio-economic groups are at far greater risk of being labelled *intellectually handicapped, borderline handicapped* or *dull-normal* than children from groups with a relatively higher social status.

2.18 Finally it must be pointed out that some students categorised as *intellectually handicapped, borderline handicapped* or *dull-normal* lose these labels once they leave school and move into the work force. This is particularly true of students in the *borderline handicapped* and *dull-normal* categories. It is well known that many types of adult work do not make strenuous demands on intellectual competence and many persons who have previously had extreme difficulty in school programmes make satisfactory adjustments in employment and community life. Many of these persons in adulthood are respected members of the community. Intelligence is not the only prerequisite for a successful family life, vocational competence and community acceptance.

Mentally Retarded

2.19 Not all authorities agree that the term *intellectual handicap* is the most desirable of the several terms used for this disorder. The other term in wide use in the United States and elsewhere is *mental retardation.*

2.20 In 1973 the American Association on Mental Deficiency published a revised manual on definitions and terminology (Grossman, 1973). This publication contained a new definition of the term *mental retardation.* As already indicated, Council prefers the term *intellectual handicap,* but we do not disagree with the substance of the American definition and have used it to formulate our own. The American Association definition reads as follows :

> Mental retardation refers to significantly sub-average intellectual functioning existing concurrently with deficits in adaptive behaviour, and manifested during the developmental period (Grossman, 1973).

2.21 The important point to notice is that the stress is on low level intellectual functioning (low IQ) in conjunction with low level adaptive behaviour (low level social maturity). The child cannot be assessed as *mentally retarded* unless he demonstrates *both* low level IQ and low level social functioning. A low level of intelligence is not sufficient for a diagnosis of *mental retardation*, the child must also be shown to lack the capacity for personal independence and social responsibility.

2.22 The *mentally retarded* are normally categorised into several levels of competence. Table 2.2 describes these levels, grouped according to levels of intelligence. This classificatory scheme does not make specific reference to adaptive behaviour, but despite this limitation is a reasonable guide to degrees of deficiency observed in retarded populations. *Mildly retarded* children are very often found in special classes in the regular schools, but a large proportion of this group is also located in special schools. In general, the lower their level of intelligence and social and academic competence the more likely it is that they will be educated in special schools.

Table 2.2

AAMD Standard Deviation (SD) Ranges According to Measured Intelligence Levels

Descriptive term	Range of SD values	Corresponding IQ range for tests with SD of 15 and 16	
		15	16
Mild retardation	-3.00 to -2.01	55-69	52-67
Moderate retardation	-4.00 to -3.01	40-54	36-51
Severe retardation	-5.00 to -4.01	25-39	20-35
Profound retardation	Below 5.00	Under 25	Under 20

Adapted from Grossman (1973, p.18)

2.23 The next group, the *moderately retarded*, is mostly educated in special schools. Some *moderately retarded* children who perform well on tests of literacy are educated in special classes. At the next level are the *severely retarded* children. Some of the more competent *severely retarded* children are educated in special schools, but a large proportion is cared for by the Division for the Intellectually Handicapped and the Slow Learning Children's Group.

2.24 The last group contains the *profoundly retarded*. Most of the *profoundly retarded* children are found in hospitals, institutions and day activity schools. Some of the severely and profoundly handicapped do not receive formal schooling of any kind. A few attend special schools.

2.25 Table 2.3 describes the typical behavioural expectations of persons classified as *mentally retarded*. It expresses average expectations and cannot be used as a norm for all children. Some perform at a higher achievement level than predicted, others at a lower level. The situation is almost always more complicated than is indicated in Table 2.3 because other factors, for example, home conditions, the presence of other handicaps, personality and emotional variables, all influence performance. Even so, the table provides a reasonable guide to the prospects of children classified as *mentally retarded*.

School Placement

2.26 It is sometimes assumed that if a child in the normal grades performs poorly on an IQ test then he or she is automatically recommended for special education placement. Such is not the case. In practice three conditions must be met before a student is recommended for placement in a special school or special class. First, the learner must demonstrate an inability to cope with the regular grade programme. Wide variability in attainments is observed in most regular classrooms, but there are limits

TABLE 2.3

Typical Adaptive Behaviour Expectancies at Various Ages
for Persons with Low IQs

Intellectual Level Based on IQ Test Scores	Age Levels		
	Preschool Age 0-5 (Maturation and Development)	School Age 6-20 (Training and Education)	Adults 21 and Over (Social and Vocational Adequacy)
Profound (IQ 0-19)	Gross retardation; minimal capacity for functioning in sensorimotor areas; needs nursing care.	Some motor development present; may respond to minimal or limited training in self help.	Some motor and speech development; may achieve very limited self-care; needs nursing care.
Severe (IQ 20-35)	Poor motor development; speech minimal; generally unable to profit from training in self-help; little or no communication skills.	Can talk or learn to communicate; can be trained in elemental health habits; profits from systematic habit training.	May contribute partially to self-maintenance under complete supervision; can develop self-protection skills to a minimal useful level in controlled environment.
Moderate (IQ 36-51)	Can talk or learn to communicate; poor social awareness; fair motor development; profits from training in self-help; can be managed with moderate supervision.	Can profit from training in social and occupational skills; unlikely to progress beyond 2nd grade level in academic subjects; may learn to travel alone in familiar places.	May achieve self-maintenance in unskilled or semiskilled work under sheltered conditions; needs supervision and guidance when under mild social or economic stress.
Mild (IQ 52-67)	Can develop social and communication skills; minimal retardation in sensorimotor areas; often not distinguished from normal until later age.	Can learn academic skills up to approximately 6th grade level by late teens; can be guided toward social conformity.	Can usually achieve social and vocational skills adequate to minimum self-support but may need guidance and assistance when under unusual social or economic stress.

Adapted from *Mental Retardation Activities of the U.S. Department of Health, Education, and Welfare*, (1963, p.2).

that are usually set to allow the teacher to plan programmes that are consistent with the general goals for the grade. The *intellectually handicapped* and *borderline handicapped* learner very often fall somewhat below this lower limit. Second, the learner must demonstrate immature social responses. Personal independence, social maturity and emotional adjustment must also be shown to be deficient. The child must show a poor adjustment in the regular class. Third, the same student must demonstrate cognitive abilities that are inadequate for regular grade placement. In simple terms, intellectual growth must be shown to be developing at a very slow rate as measured on a standardised IQ test. It is usually the case that when these three conditions are fulfilled, that is, low scholastic attainments, immature social behaviour and a slow rate of intellectual growth, that placement in a special class or special school is considered desirable.

Labelling

2.27 We have introduced a number of terms with the intention of clarifying and defining a complex problem. However, there is evidence to support the view that the widespread use of these disability labels does a great deal of harm. The terms have some value in differentiating the types of programmes that should be offered to *intellectually handicapped, borderline handicapped* and *dull-normal* pupils, but they have little value outside this context. The Council is of the view that teachers should be extremely cautious about the use of these terms in case they create the impression that the learning potential of these pupils is irreversibly impaired. Further, the diagnostic information which is the basis of the label should be used to set realistic goals and expectations, but only after due consideration has been given to the other factors, such as motivation and personality.
Teachers and guidance officers should stress the fact that

intellectually handicapped, borderline handicapped and *dull-normal* children normally make substantial progress while in school. Many change their status, and improvements in the intellectual competence of these pupils have been recorded in many case histories.

RECOMMENDATION 1 : *Such labels as intellectually handicapped, borderline handicapped and dull-normal should not be used outside a clearly defined professional setting. Children of limited intelligence should not be hampered by a label, but should instead be encouraged and assisted to normalise their status and social relationships in the school and community.*

CHAPTER THREE

HISTORICAL DEVELOPMENT

The Period 1890 - 1920

3.1 Before 1920 little provision for the education of intellectually handicapped children was made in Western Australia. In contrast, in the United States and the United Kingdom facilities for the education of these children were first established in the middle of the nineteenth century. However, there had been interest from agencies such as the Education Department, the Public Health Department, the State Children's Department, the Department for the Insane, and the Teachers' Union in providing services for such children. Some of the reasons for this interest are suggested in an interview with the Colonial Secretary which was reported in the *West Australian* on the 9 April 1918.

> So far as the question of cost is concerned it will be cheaper in the long run to deal with these children as children than to allow them to grow up to useless lives - to help to swell the numbers to be maintained in our hospitals, asylums and gaols. The problem of the mentally defective child is one which we must grapple with. If we do not we shall continue to pay the ever increasing penalty of its neglect.

3.2 Soon after 1900 the Education Department's Chief Inspector Mr J.P. Walton, visited school systems overseas and on his return he expressed a desire to establish special classes for intellectually handicapped children in Western Australia (*Annual Report*, Education Department, 1907; *Annual Report*, Education Department, 1909). Largely as a result of Walton's interest and initiative two special classes for intellectually handicapped children were established; the first at Perth Infants School in 1910 and the second at Princess May Infants School in Fremantle in 1912.

3.3 At this time both teachers and inspectors were expressing concern at the relatively large number of educationally retarded pupils, shown in the statistics published in annual reports of the Education Department. The established practice was to promote pupils to the next standard provided they passed the annual examination successfully. Levels of achievement were prescribed for each standard, and failing pupils repeated the class; more than once if necessary.

3.4 Table 3.1 shows that in 1910 children in Standard I were usually 7 or 8 years of age. Further, the table shows that there were 1,029 children who were aged 9 years or more and this group included 649 children aged 9 years, 223 children aged 10 years, 91 children aged 11 years, 40 children aged 12 years, 17 children aged 13 years, and 9 children aged 14 to 16 years.

3.5 The problem of children unable to profit from regular class instruction had been recognised earlier, and in 1895 the Education Department's regulations were amended to exempt from presentation to the First Standard "children who, through bodily or mental weakness, are not ready for promotion" (*The Education Circular*, Volume I, 1899, p.47). When a programme of medical inspection of school children was commenced in 1906, there was confirmation of the fact that the group of educationally retarded children included a sub-group who were, in the language of the times, feeble minded and mentally defective (*Annual Report*, Education Department, 1906, p.36).

TABLE 3.1

Ages in Standards on 24 June 1910

Ages	Below 6	6	7	8	9	10	11	12	13	14 & under 16	Total
Infants	3,131	3,252	1,674	443	115	36	7	8	- -	1	8,667
Standard I	37	523	1,827	1,539	649	223	91	40	17	9	4,955
II		16	353	1,437	1,479	763	286	111	42	13	4,500
III			13	307	1,277	1,375	865	354	171	56	4,418
IV				14	241	1,058	1,158	809	400	130	3,810
V					21	244	883	1,087	707	263	3,205
VI						15	142	580	719	430	1,886
VII							12	110	350	407	879
Ex VII							1	8	68	247	324
Totals	3,168	3,791	3,867	3,740	3,782	3,714	3,445	3,107	2,474	1,556	32,644

Annual Report, Education Department, 1910, p.38

3.6 Despite the hope that children identified as mentally defective would be taught in special classes or in special residential schools, we have already noted that the first two special classes were not established until 1910 and 1912 respectively, and both classes were disbanded within two years on the grounds of falling enrolments and relatively high levels of expenditure.

3.7 Notwithstanding the closure of these two classes, during the next decade government departments continued to give attention to the problem of the provision of services for mentally defective children. Also during this period the need to provide educational facilities for mentally defective children was being recognised throughout Australia, and the matter was discussed at the first Conference of the Australian Directors of Education in 1916. (Weiland, 1975).

3.8 In 1918 the Colonial Secretary asked the Director of Education and the Inspector General of the Insane to consult together regarding provisions made for mentally defective children. The Official Visitors to the Claremont Hospital for the Insane had drawn the Colonial Secretary's attention to the "hopeless outlook for the imbecile children in that institution" (*West Australian*, 9 April 1918). Following this consultation with the Inspector General of the Insane, the Director of Education arranged for a survey to determine the extent of mental defectiveness among children in government schools. This survey did not include educationally backward children, and because the criteria for the diagnosis of mental defectiveness were neither objective nor rigorous the survey yielded poor results. In spite of this, the results supported the view of those who considered there was a need for a definite Education Department policy on the education of mentally defective children. It was suggested that there should be boarding schools or segregated residential schools for severely defective children, and special classes should be provided for the less severely defective.

3.9 Other persons also showed interest in these children during the same period. In 1911, one of the Visitors to the Claremont Asylum, Dr Birmingham, had travelled overseas to inquire into methods used to educate "imbecile children" (Dr Ellis, personal communication). However, it was not until 1917 that Dr Anderson, Inspector General of the Insane, requested the Education Department to help him find a Montessori-trained teacher for the Asylum. In due course a teacher was located, and in the 1920 *Annual Report of the Inspector General of the Insane* favourable comments were made regarding the work of this teacher with children who were resident there.

3.10 In a report to the Director of Education in 1918 eight children at North Fremantle School were described as mental defectives. In the following year, the headmaster inquired of the Director of Education whether special provision was to be made for these children at the school or whether he should exclude them (*Education Department File* 72-26, p.7). As a result of the headmaster's action Dr Roberta Jull of the Public Health Department was requested to examine the children concerned. She examined fifteen children at the school and used, apparently for the first time in Western Australia, the Binet-Simon Test of Mental Ability (Weiland, 1975). Dr Jull recommended that separate residential and educational facilities should be provided for the more severely defective children and public concern in the matter was stimulated by discussion in parliament. As a result of her examinations at the North Fremantle School, three children were excluded from the school and consideration was given to excluding others. In its 1919 *Annual Report*, the Education Department stated that a classroom would be erected at the North Fremantle School so that a special class for these children could be established.

3.11 At about the same time increased public interest in the provision being made for mentally defective children was shown by such groups as the Women's Christian Temperance Union, the Women's Labor Organisation and the Western Australian Teachers' Union. However, public expenditure to provide buildings and specially trained teachers remained minimal. Although the education of mentally retarded children was discussed in parliament and in the press in 1918, in the following year when the *Public Education Act Amendment Act* was passed, making the education of deaf and blind children compulsory, members of parliament had to be assured that the facilities to cater for the compulsory education of all deaf and blind children already existed, and that the amendment would not result in additional public expenditure. Speaking in the debate in the Legislative Council

Sir E.H. Wittenoom queried whether the amendment would mean more institutions and "add to the already prodigal expenditure of the Education Department". He went on to say that the government "might establish many institutions productive of good, but we are at the end of our means" (*Western Australian Parliamentary Debates*, Volume 63(1) New Series, p.1874).

3.12 The use of the Binet-Simon test by Dr Jull as a basis for the classification of children resulted in questions in parliament. In 1920, the Hon W.C. Angus asked the Minister for Education a series of questions regarding twenty children in the special class at the North Fremantle School. Angus was concerned that the children had been isolated in the special class after having been labelled "mentally defective" by persons who had not been trained to administer the test. The Minister for Education denied that the children had been labelled but did admit that the Binet-Simon test had been used by a medical officer who had not been trained in its administration. However, he went on to say that medical officers in most parts of the world were entrusted with the classification of mental defectives and commented that the children had been separated because they could not profitably be taught in ordinary classes. (*Western Australian Parliamentary Debates*, Volume 63(2) New Series, p.2001).

The Period 1921 - 1940

3.13 At this time many teachers were aware of the problem of the slower child and some attempts were made to provide alternative programmes. In larger schools it was not uncommon to find *opportunity classes*. 20-25 children were usually enrolled in these classes which was a small number by the standards of that period. They provided a minimum skills programme and often emphasised handwork as an alternative to academic work.

Although some of the children in these classes were known to be intellectually handicapped,, the classes also included educationally backward children and children frequently absent from school because of poor health or truancy, and others whose behaviour disrupted the routine of regular classrooms. There was no assessment service available and there was a tendency to regard opportunity classes as places to segregate those children who prevented other children from benefitting from the regular school programme.

3.14 By 1927 the Education Department had some classes for retarded boys in residence at the Seaforth Boys' Home. In that year a conference of several ministers and their departmental staff recommended that "the instruction of mental defectives, including imbeciles, should be the responsibility of the Education Department" *(Education Department File 1807/25,* p.43). At this conference the Minister for Education made it clear that if his department were to assume this responsibility, dual control of the educational programmes for these children should be avoided.

3.15 The economic depression of the early 1930's imposed severe financial constraints on public expenditure and the Education Department did not assume further responsibility for the instruction of mentally defective children. Following the closure of the opportunity class at the Highgate School, the only remaining provision made by the Education Department for such children was at the Seaforth School. Even so, there was continuing public concern and during the 1930's there were frequent demands from various organisations, such as the Teachers' Union, regarding the need to establish a diagnostic and assessment centre and also the need to provide special education for intellectually handicapped children. In 1937 another inter-departmental committee met and made recommendations similar to those made in 1927 (Weiland, 1975).

3.16 In its 1937 *Annual Report*, the Education Department recorded that group intelligence tests had been administered to Standard

VI pupils throughout Western Australia, and noted that two per cent of the children tested came within the category of feeble-minded or backward. The report went on to suggest that special classes in normal schools should be established for the "higher grade" of backward children and that special schools should be provided to educate "intermediate grade" backward children (*Annual Report*, Education Department, 1937, pp.24-25). However, in general, little progress was made towards providing education for mentally defective children. By 1938, apart from the small number of boys located at the Seaforth School, the main avenue open to the Education Department was "to exclude these children when they are a menace" (*Annual Report*, Education Department, 1938, p.8).

3.17 In 1938 a *Royal Commission on Youth Employment and the Apprenticeship System* recommended that a vocational guidance bureau should be established under the supervision of a trained psychologist.

The Period 1941 - 1960

3.18 In 1941 the Royal Commission's recommendation to establish a vocational guidance bureau was implemented and Mr J.A. McCall was seconded from the teaching service and appointed to carry out the duties of a careers officer in the schools. In January 1943, McCall was appointed to the position of Careers Research Officer and this educational service rapidly expanded to become the Careers Research Branch of the Education Department. Subsequently, experienced teachers with qualifications in psychology were appointed as guidance officers in schools.

3.19 From the time it was established in 1943, the Careers Research Branch received an increasing number of requests from headmasters for the testing of retarded children

and children with behaviour problems. Five years later, about half the time of guidance staff was spent dealing with such children *(Annual Report*, Education Department, 1948, p.11). In 1949 the Careers Research Branch was renamed the Guidance Branch.

3.20 At this time, the Western Australian Director of Education Mr M. Little, was showing interest in the education of handicapped children. In 1948 Little attended a UNESCO Conference in Beirut and also visited the United Kingdom and North America where he investigated provisions being made for the education of handicapped children. He returned to Perth "more firmly convinced that the main consideration in the education of the handicapped child was to build his self-confidence, to concentrate on whatever powers and possibilities the child possessed, to develop his resources and so build up as normal a personality as possible" *(Annual Report*, Education Department, 1949, p.6). In the same report Little stated that it was the Education Department's firm conviction that the State's responsibility did not end with the payment of a subsidy to private organisations, and that such education should be state controlled.

3.21 In 1951, Mr McCall had listed some of the obstacles to the development of educational services for mentally retarded children. These were :

1. Lack of professional knowledge in techniques.
2. Lack of knowledge of the extent and nature of the problem in Western Australia.
3. Shortage of staff and accommodation to deal with small groups.
4. Uncertainty as to the responsibility for the care of certain types of children *(Annual Report*, Education Department, 1951, p.19).

3.22 In 1952 Section 9 of the *Education Act* was amended to make the education of mentally defective children compulsory. The education of blind children and of deaf mute children had been compulsory since 1919, although up to 1945 successive

governments had given only limited financial support to the education of both groups of children. During the second reading of the bill the Minister for Education supported the section relating to handicapped children, and pointed out the advances which were being made in the provision of education for a wide range of handicapped children. Even so, he admitted the paucity of provision for intellectually handicapped children by praising the exemption clause of the *Education Act* as a sensible provision until such time as the government was able to arrange to educate all handicapped children. He concluded that it would not be long before all handicapped children would receive proper attention (*Western Australian Parliamentary Debates*, Volume 131, New Series, 1952, p.907).

3.23 During the same debate, Dr J.G. Hislop stated his understanding that "the state provided education for all children and that any parent was entitled to send his child to a state conducted or subsidised school". He asked why the onus for providing education for handicapped children should be placed on the parent of the child and stated "if a normal child receives education at the expense of the state, surely it is the state's responsibility to educate every child. It is introducing a distinction between groups of people" (*Western Australian Parliamentary Debates*, Volume 131, New Series, 1952, pp.1793-4).

3.24 The problems listed by Mr McCall (3.21) influenced the development of facilities. The immediate problem at that time was to provide for the needs of children who were already in the school system and who had been identified as requiring special help. There were constraints upon the rate at which facilities could be established. The Education Department was faced not only with a lack of classrooms but also with rapidly increasing enrolments, a commitment to extend the

provision of secondary education and a further commitment to reduce class numbers.

3.25 In spite of these difficulties the Guidance Branch undertook the task of establishing special classes for slow learning children in regular schools. The term *slow learner* was chosen to indicate that these children were capable of learning most of the skills normally associated with school programmes, but that their rate of progress would be slower than average. The classes were intended for children who would now be identified as borderline handicapped but initially provided for some children who were mildly and moderately intellectually handicapped.

3.26 Each of these classes served an area and hence each was located in a school which was reasonably accessible to public transport. Numbers in the classes were limited to 20 children, less than half the size of the average primary class of the time. The age range of pupils enrolled was from eight to fourteen years. Classroom space was usually available only in schools in older areas with diminishing child populations. As further cases were referred efforts were made to establish new classes to meet the demand. There was no compulsion upon parents to send their children to special classes. Following assessment parents were advised of a child's problems and placement was offered if available. Parents were free to accept or reject the placement.

3.27 Teachers were recruited by the Guidance Branch staff. No training courses were available, but as there were many successful teachers in the service who had never had the opportunity to attend a course of training at a recognised teachers' college, learning by experience was not considered unacceptable. At a time when teachers were in short supply, service in an area where there were few guidelines and no possibilities for promotion was not very attractive. Special

class teachers therefore tended to be married women who were ineligible for appointment to the permanent staff and had no prospects of promotion.

3.28 With the expansion of pre-school facilities in the fifties more children were referred at early ages, leading to the establishment of junior (preparatory) special classes to cater for children aged six to eight years. When secondary school provision was extended and made available to all children special classes were established in high schools.

3.29 While the Education Department was establishing classes for borderline handicapped children there were significant developments in other areas. Although a few severely handicapped children were included in these classes, most were still excluded from school. They were either kept at home and maintained by their parents or were inmates of the Claremont Mental Hospital.

3.30 In 1950, a bequest from Nathaniel Harper enabled the Mental Hospitals Department to establish at Guildford two separate facilities for severely retarded children, and some of the children from Claremont Mental Hospital were transferred to these facilities. The Education Department provided three teachers for the forty severely retarded children (*Annual Report*, Education Department, 1953, p.25). As had been shown by the work of the Montessori teacher at the Asylum in 1920, these children could develop skills previously thought to be beyond their capacity if they received stimulation and training rather than custodial care.

3.31 At about the same time provision was being made for some of the children who were maintained at home by their parents. In consultation with Mr J. McCall, Dr Elwyn Morey at the University of Western Australia accepted a small number of severely retarded children into a special kindergarten group in the university. The Director of Education provided a part-time teacher (Wheeler, 1976, p.34).

3.32 During 1951 a series of meetings was convened among persons concerned with the welfare of intellectually handicapped children, including the Women's Service Guild and a group of parents associated with the special university kindergarten group. On 10 October 1951 a public meeting was held which resulted in the formation of the Slow Learning Children's Group of Western Australia (Inc.). This name was adopted in an attempt to encourage parents to join and to minimise the stigma attaching to terms such as *mentally defective* and *mentally deficient*. Subsequently, to avoid confusion, the Education Department changed the name of its slow learning children's classes to special classes.

3.33 By 1953 the Slow Learning Children's Group had established pre-school classes, a clinic staffed by voluntary professionals, and had conducted a survey of slow learning children in Western Australia. This survey indicated that there were many children whose needs were not being met. The Slow Learning Children's Group was aware that their limited resources could not be extended to cater for a growing demand, and an approach was made to the Education Department for assistance.

3.34 The Education Department lacked funds for capital works for special schools. The Slow Learning Children's Group members believed that they could raise funds for buildings and equipment, but could not guarantee the continuing costs of salaries for the teaching staff. One member of the committee summed up the situation by stating that the Slow Learning Children's Group could not expect to employ and retain competent staff if their salaries were dependent upon collection tins. An effective compromise was reached. The Slow Learning Children's Group agreed to continue to raise funds for the purchase of land, buildings and equipment, and buildings were modified or erected to meet the Education Department's specifications. This condition was included to ensure that at a later date, when funds became available,

the Education Department could purchase the buildings if the Slow Learning Children's Group wished to sell them. When a suitable Slow Learning Children's Group building was available the Education Department guaranteed to provide and pay teachers and also to meet bus transport costs.

3.35 The first school established under this arrangement was the Minbalup Occupation Centre which was opened at Victoria Park in 1954 with 36 mildly and moderately handicapped children from throughout the metropolitan area. At a later stage the names of this and subsequently established centres were changed to Training Centres to indicate that the pupils were involved in learning and not just being kept occupied. Still later, when the Mental Deficiency Division of Mental Health Services established training programmes for profoundly retarded children the centres adopted the name of Special Schools for Intellectually Handicapped Children. By 1960 there were six special schools for the intellectually handicapped in the metropolitan area and five in country towns.

The Period 1961 - 1980

3.36 During the 1960s three developments affected the provision of services for the intellectually handicapped. In 1964 Mental Health Services assumed total responsibility for Irrabeena, the Slow Learning Children's Group's Assessment Centre. This formed the basis for the formation of the Mental Deficiency Division within the Mental Health Services (Hamilton, 1977, p.375). In 1966 the Education Department assumed full responsibility for the provision of new buildings and equipment in addition to staff and transport for all Training Centres.

3.37 It was also during the 1960s that there was a fundamental change in the concept of how severely and profoundly

intellectually handicapped children should be cared for in Western Australia. From its inception the Slow Learning Children's Group had rejected the concept that their children were *sick* and insisted on education and training rather than institutionalisation. During the early 1960s some children, who were considered not yet capable of attending an occupation centre, attended training programmes at the Slow Learning Children's Group's Assessment Centre. In 1963 the first Day Minding Centre was opened. From this developed the present system of Day Activity Schools. Although the Education Department's assistance for the more severely handicapped children was limited, there was an increase in the funds provided both by state and commonwealth departments.

3.38 The Mental Deficiency Division had adopted the policy that institutionalised intellectually handicapped children were in need of training rather than treatment. When the Pyrton Training Centre was opened in 1966 it was decided that it should not be headed by a medical superintendent nor staffed by nurses. Considerable thought had been given to the kind of training which would be appropriate for Pyrton staff and eventually a course for Social Trainers was established at the Perth Technical College (Hamilton, 1977, p.374).

3.39 Drummond (1978) has called the 1970s the decade of rehabilitation. In Western Australia improvements in the provision of facilities reflected the increasing and widespread concern which has developed for the habilitation and rehabilitation of handicapped persons. The establishment of the Senate Standing Committee on Health and Welfare in 1970 reflected part of this concern. The Committee's recommendations on the education of handicapped persons included proposals that the commonwealth government should become involved in funding pre-school and school-age education for handicapped children, vocational preparation for handicapped pupils, and the specific training of teachers to meet the particular needs of handicapped children (Drummond, 1978, p.11).

3.40 In 1972 the Interim Committee of the Australian Schools Commission was appointed. One of its terms of reference was "to take into account..... (iii) the particular needs of schools for the handicapped, whether mental, physical or social and of isolated children" (*Report of the Interim Committee for the Australian Schools Commission*, 1973, p.3). Since 1973 a significant outcome has been that the commonwealth government has provided recurrent funds and capital funds to Western Australia for special schools, and for associated teacher education courses and this assistance has increased the rate at which improvements have been made.

3.41 During the 1970s increased funds for education have made it possible to reduce class sizes in regular schools in Western Australia as additional teachers have been appointed to these schools, and some children, who might previously have been moved into special classes were able to remain in regular classes. Although a greater number of *borderline handicapped* children remained in regular classes, the Education Department's policy has been that there are children for whom special provision must be made in special classes or in special schools.

3.42 Several other developments in the 1970s merit comment. Special classes were established for some children who had multiple handicaps. Pre-primary classes were established both in the metropolitan area and in some country towns for younger intellectually handicapped children. Further, a pilot home based programme was established by the Division for the Intellectually Handicapped to increase the provision made for very young intellectually handicapped children. Finally, undergraduate and graduate courses in special education were established for teachers at several tertiary institutions.

3.43 Since 1900 there has been a marked increase in educational provision for intellectually handicapped persons. In 1900 there was literally no provision. In 1910 the first special class was established and in 1979, among an estimated population of over 275,000 children between the ages of six years and eighteen years, almost all intellectually handicapped children of school age who could benefit from educational programmes were receiving some educational provision from the Western Australian Education Department.

CHAPTER FOUR

THE ADMINISTRATION OF SCHOOL PROGRAMMES FOR INTELLECTUALLY HANDICAPPED PUPILS

4.1 As previously stated, the needs of intellectually handicapped children vary greatly. Some intellectually handicapped children need total bed-bound care while others need only occasional help in education, daily living and recreation. Within this state services for these children are provided by a variety of agencies, government and voluntary, though it should be noted that no voluntary agency provides services solely from its own resources. All voluntary agencies are subsidised to a greater or lesser extent by the commonwealth and state governments.

4.2 Different views on the nature of intellectual handicap have influenced and continue to influence the type of services provided by various agencies. Some of these issues were referred to in Chapter Two. In the early part of this century the general view of intellectual handicap was that it was an incurable medical condition. Medical considerations dictated the kind of treatment, and legal factors influenced the degree of protection and care given to intellectually handicapped individuals. More recently the social and psychological dimensions of the disorder have been recognised.

4.3 This recognition has led to a change in emphasis from physical care towards understanding, preventing, and ameliorating the condition. Professional groups have become aware that the achievements of these children are susceptible to change through education. The general emphasis has altered from that of providing medical care and protection to developing services which assist intellectually handicapped persons to reach their highest possible level of personal and social functioning.

4.4 This changed perspective has necessitated changes in the mode of service provision. It has resulted in over-provision and duplication of services in some areas and under-provision in others. Tensions and uncertainties are inevitable as different groups with different perspectives seek to provide the best possible services to their clients. However, it is only by mutual cooperation and a willingness to understand the level of contribution of all groups that efficient services can be provided for a common clientele.

4.5 The Council is impressed by the degree of cooperation that exists at an individual level between the personnel of various agencies. However, the types of services provided for the intellectually handicapped in this state, the level of services, and the number of persons receiving these services have changed so much in the past twenty-five years that the Council considers that the need for a greater degree of cooperation and public accountability should be encouraged by government in the areas of service delivery and educational provision.

4.6 Many different forms of organisation for the provision of services to the intellectually handicapped have been tried in other Australian states and in other countries. Rather than recommending one type of organisation in preference to another the Council considers that improvements should be made in the existing arrangements for coordination between agencies.

4.7 Improvements in the coordination of policies and procedures at a state-wide level might be better achieved if regular meetings were held between senior persons from government departments and voluntary agencies providing services for the intellectually handicapped. It is also suggested that public meetings should be held periodically at which departmental representatives should meet with representatives of voluntary bodies, parents and interested members of the public to exchange information and discuss policies and areas of concern.

RECOMMENDATION 2 : *The Minister for Education should encourage regular meetings between senior persons from government departments and from voluntary agencies to discuss the coordination and development of services for the intellectually handicapped.*

RECOMMENDATION 3 : *The Minister for Education should give support to periodic public meetings in city and country areas to provide forums for the transmission of information and for the discussion of areas of concern to parents.*

Special Education in Primary and Secondary Schools

4.8 An issue of major concern to the Council is the education of dull-normal of borderline and of intellectually handicapped children in primary and secondary schools. It is important to realise that the number of such children is relatively substantial.

4.9 In Chapter Two, paragraph 2.5, it was noted that intellectually handicapped children normally require full-time special education services. In paragraph 2.6, it was indicated that borderline handicapped children normally require special education services for only part of their school programme, and in paragraph 2.7, that dull-normal children may occasionally require special education services but that many of the latter group adjust reasonably well in the regular school situation and are never officially classified as handicapped.

4.10 In paragraph 2.14, Table 2.1 indicates that 0.98 per cent of a normal age cohort may be intellectually handicapped, 8.78 per cent borderline handicapped and 10 per cent dull-normal. Therefore it is estimated that approximately 20 per cent of the school population is potentially in need of special educational assistance at some stage of their school careers.

4.11 It is known that approximately half of the intellectually handicapped students are at present receiving special help in special schools or in institutions. However, few of the borderline handicapped and dull-normal are receiving any special education provision. If the above averages (excluding those in special schools) are applied to a high school of 1,000 students it is probable that there will be approximately five intellectually handicapped students, 88 borderline students and 100 dull-normal students, a total of 193 in the school who may require special provision. Similarly, in a Class 1A school with 700 students there will probably be approximately three intellectually handicapped children, 61 children who are borderline handicapped and 70 children who are dull-normal, a total of 134 children in the school requiring special assistance of some kind. Finally, if the example of a Class II school with 260 students is taken a reasonable estimate is that there will probably be one intellectually handicapped child, 23 children who are borderline handicapped and 26 children who are dull-normal, a total of 50 children in the school who need some special help at least for part of their school programme. To sum up, it should be clearly recognised that there is a significant number of intellectually handicapped, borderline and dull-normal children in most regular schools who require some special education provision. Some are already receiving help in special classes, most are not. This fact has important implications for school organisation and staffing.

4.12 The Council suggests that particular attention should be given to the provision of educational services for dull-normal, borderline, and intellectually handicapped children in primary and secondary schools. We do not suggest that this need can best be served by increasing the number of special classes in schools but we do suggest that better trained teachers should be appointed to cater for the needs of these pupils and to assist them to adapt to the regular school programme wherever possible. These pupils require adequately trained teachers who can plan and implement appropriate educational programmes. We believe that regular school principals have a key role to play in developing such programmes.

RECOMMENDATION 4 : *Principals of regular schools should take an active role in establishing relevant educational programmes for dull-normal, borderline and intellectually handicapped pupils.*

RECOMMENDATION 5 : *Within the established staffing formula, the Education Department should select or appoint at least one teacher to each subject department in all secondary schools to organise programmes for dull-normal, borderline and intellectually handicapped pupils. These teachers should have proven competency in a subject discipline and some special education training.*

RECOMMENDATION 6 : *Within the established staffing formula, the Education Department should select or appoint at least one teacher to every Class IA, Class I and Class II primary school to organise programmes for dull-normal, borderline and intellectually handicapped pupils. These teachers should have proven competency in primary teaching and some special education training.*

Staffing of Schools

4.13 The formula for staffing special schools for the intellectually handicapped is based on a ratio of one teacher to twelve pupils and this has not altered since 1954 when the Education Department accepted responsibility for these children. Since 1968 the teacher-pupil ratio in regular government primary schools has dropped from 1:32.9 to 1:23.2 and in government secondary schools from 1:19.1 to 1:13.6 (Education Department of Western Australia, *Education Department Pocket Year Book, 1979*, p.29).

4.14 Evidence presented to the Council suggests that the characteristics of pupils enrolled in special schools for the intellectually

handicapped have altered. More children with severe and profound intellectual handicaps, and more children with multiple handicaps are being admitted to these schools. Also children with severe behavioural problems are being transferred to these special schools from primary and secondary schools. These changes pose new and complex management problems for teachers in these schools.

4.15 The teacher-pupil ratio in units for visually handicapped, and for hearing-impaired children is 1:6. Some of the multiply handicapped children in the special schools for the intellectually handicapped pose at least as great a management problem as children with a single sensory handicap. The Council considers that the changes in the characteristics of pupils enrolled in these special schools for the intellectually handicapped should be acknowledged and an improvement made in the teacher-pupil ratio. No formula can take full account of the varying and differing situations among schools, but the Council considers that a revised staffing formula would give principals greater flexibility in organising instructional groupings.

RECOMMENDATION 7 : *Special schools for the intellectually handicapped should be staffed on the basis of one trained teacher to every ten pupils and one teaching aide to every 20 pupils. There should be sufficient flexibility in this staffing formula to allow for a lower teacher-pupil ratio in schools which can demonstrate an enrolment of a higher proportion of multiply handicapped, severely or profoundly handicapped pupils.*

The Classification of Special Schools

4.16 The Education Department classifies primary schools into five categories based on the number of enrolled pupils. The

regulations governing the classification of primary schools and special schools are set out below.

162 (1) Subject to the provisions of regulation 163 of these regulations and of subregulation (3) of this regulation, full-time primary schools are classified as follows :

Class IA, being schools having an average attendance of over 600 pupils;
Class I, being schools having an average attendance of over 300 but not over 600 pupils;
Class II, being schools having an average attendance of over 120, but not over 300 pupils;
Class III, being schools having an average attendance of over 30, but not over 120 pupils;
Class IV, being schools having an average of 30 or less than 30 pupils.

(2) A school may be declared a "special school" if in the opinion of the Director-General, it carries additional responsibilities.

(3) The classification of a special school shall be determined by the Director-General in accordance with the particular circumstances of the school.

163 (1) The classification of a school shall be reviewed once every two years and the school may be raised to a higher, or reduced to a lower, class upon the figures for the year if the Director-General is satisfied that the alteration is likely to be permanent.

(2) An alteration of classification of a school may be made at any time other than that referred to in subregulation (1) of this regulation if the Director-General considers that special circumstances render the alteration necessary or advisable.

164 If a school does not maintain an average attendance of eight pupils, the Minister may, if he thinks fit, cause it to be closed.

The additional regulations governing the establishment and classification of special schools for handicapped children are:

262A (1) A full-time special school for handicapped children may be established in any locality where, in the opinion of the Minister, there is a reasonable likelihood of a constant enrolment of six children.

(2) A reference in this Part to a "special school" means a special school established in accordance with subregulation (1) of this regulation.

262B Any full-time special school established under this Part shall be classified in accordance with regulations 162 and 163 of these regulations, provided that for the purposes of determining the average attendance each pupil shall count as two.

4.17 Teachers are appointed to primary schools on the basis of a prescribed staffing formula which relates to the number of pupils enrolled. The appointment of teachers to special schools for the handicapped differs according to the type of handicap. Thus, whereas the number of pupils in a regular primary school bears a direct relationship to the number of teachers, such is not necessarily the case in special schools for the handicapped.

4.18 On educational grounds the Council considers that the appropriate basis for the classification of special schools should be the number of staff rather than the number of pupils. The present classification policy and the policy of restricting the numbers in special schools for the handicapped have had the effect of limiting special schools to Class I and below. It is considered that the classification of special schools on the basis of staff numbers will have the dual advantages of more nearly equalising the administrative loads of principals and providing more promotional opportunities within the special education sector. This latter advantage is seen as important in giving an opportunity for more experienced and qualified teachers to remain in special education with consequent educational benefits to the students.

RECOMMENDATION 8 : *Special schools for the handicapped should be classified on the basis of teacher numbers rather than pupil numbers. The Council recommends that special schools for the handicapped be classified on the following basis.*

Class III up to 5 staff including the principal
Class II 6-10 staff including the principal
Class I 11-15 staff including the principal
Class IA 16+ staff including the principal

4.19 Special schools originally catered for relatively small numbers of children and although the age range was from six to eighteen years it was possible to provide all the necessary facilities for junior and senior sections on one site. Some special schools now offer preschool programmes for children aged three to five years and the school programmes are more diverse.

4.20 In one metropolitan district separate schools are provided for junior and senior pupils. Although this arrangement was made fortuitously because of the availability of buildings, many parents and teachers have expressed approval of this organisation. They consider that it enables each school to provide more appropriate programmes and more closely resembles the regular progression of children from primary to secondary school.

RECOMMENDATION 9 : *Separate schools should be provided wherever possible for junior and senior students, or buildings should be designed to allow a clear differentiation between the two groups.*

4.21 There is now wide variation in the size of special schools for the intellectually handicapped, with no metropolitan school having an enrolment of less than one hundred and no country school having an enrolment of more than fifty pupils. Concern has been expressed to the Council on the size of the schools. Both parents and teachers consider that large schools do not provide for effective personal relationships between teachers and pupils.

4.22 This Council has consistently endorsed the principle that children should attend schools as close to their homes as possible. The present system in the metropolitan area of providing large special schools which each serves a wide area results in many children having to travel considerable distances from their homes to school. The Council believes

that the adoption by the Education Department of a planning policy directed toward the provision of smaller special schools serving more limited areas and a commitment to age-level organisation would enable more intellectually handicapped children to be educated closer to their homes.

RECOMMENDATION 10 : *No special school should be built to accommodate more than 180 intellectually handicapped students.*

4.23 The Council was specifically asked to comment on whether the concept of siting special schools for the physically handicapped on the same campuses as regular schools should be widened to include special schools for the intellectually handicapped. The idea that the planning of special schools should be an integral part of the overall planning of regular school services has not always been observed by the Education Department. It has been the practice that planning for special schools and classes for the intellectually handicapped takes place after the regular school services are provided. Some special schools and classes have been sited in buildings or at locations unwanted for regular schools. The majority of schools and classes established before 1970 were located in centres of declining child population and were geographically isolated from regular schools, thus presenting problems of transport both for parents in getting their children to school and for teachers who wish to arrange for interaction between the children with special needs and children in regular schools. With the increased funding and the more effective planning procedures of recent years the Education Department has been able to establish a number of multi-purpose campuses.

4.24 The Council is only too aware that mere physical location of a special school on a regular school campus cannot guarantee that maximum useful association between the school populations will take place. However, it considers that it is a sensible way of providing a basic condition for it to take place. During our investigation we have been unable to discover any factors which might suggest that the broadening of the concept of

multi-school campuses to include special schools for the intellectually handicapped would have any negative consequences for any of the children on such campuses. Positive consequences in economic terms are possible in reducing the time teachers at separate schools now must use organising and planning transport to ensure some interaction between special and regular school children. Other possible positive consequences include the sharing of playing fields, specialist staff and other resources.

RECOMMENDATION 11 : *The need for special education facilities should be recognised at all stages of planning for regular schools. We also recommend that where practical all future special schools for the intellectually handicapped be located on the campuses of regular schools.*

4.25 A further area of concern is that all special schools are classified as primary schools and annual departmental supplies are calculated on the primary school scale. However, the special schools for the intellectually handicapped offer programmes in home science, manual arts and arts and crafts, which are more related to the secondary curriculum. As not all the material for these programmes can be purchased at reduced rates through Government Stores because of the primary status of the special schools, additional expense is incurred in purchasing from other sources. If recognition were given to the fact that the special schools enrol students of secondary school age and provide a number of programmes which have more in common with secondary than primary schools some of the problems resulting from the classification of special schools as primary schools would be avoided.

RECOMMENDATION 12 : *The secondary component in the programmes of special schools for the intellectually handicapped should be recognised in the allocation of supplies.*

4.26 The daily period of attendance for children attending some special schools is shorter than that of students attending regular schools. The basis for this organisation is that most of the children attending the special schools are transported by bus. In the past many left home at 7.30 am and did not return home until 4.30 pm. It was thought that the combination of regular school hours and long travelling time imposed too great a strain on the children. However, as more special schools have become available the amount of time that children spend on buses has been considerably reduced. The Council considers that shortening the period of instruction for children who learn more slowly is not in their best educational interests. It is the Council's view that the instructional time for intellectually handicapped students should be at least equivalent to that of students in regular schools.

RECOMMENDATION 13 : *Both in country areas and in the metropolitan area the length of the school day in special schools for intellectually handicapped students should be the same as that in regular schools, with scope for variation according to the ages and needs of the students.*

Curriculum in Special Schools

4.27 The Special Education Branch of the Education Department is responsible for the quality of education provided within the special schools, but, as with regular schools, curriculum development is becoming increasingly the responsibility of individual schools. School-based curricula permit the development of programmes which are more directly related to the needs of individual children than centrally prescribed curricula. Nevertheless, there are certain professional and community expectations which must be taken into account in the development of curricula.

4.28 The expectation that every effort will be made by the Education Department to ensure that students receive appropriate

education in the areas of literacy and numeracy is held as strongly by parents of intellectually handicapped children as by other parents. Without wishing to diminish in any way the autonomy of special schools in curriculum development the Council considers that special schools should be as responsive to such a widely held expectation as regular schools.

4.29 In the past it has been assumed that because the developmental rate of intellectually handicapped children is in general slower than that of non-handicapped children, the introduction of literacy and numeracy skills should be delayed. The results of some recent experimental programmes suggest that earlier exposure might be beneficial for some intellectually handicapped children. While not supporting the claims of those who believe that very early introduction of literacy and numeracy skills will enable intellectually handicapped children to reach normal standards, the Council considers that these components should be introduced into special school programmes in the early years.

RECOMMENDATION 14 : *Programmes in functional literacy and numeracy should be included in the curricula of all special schools for the intellectually handicapped.*

The Organisation of Special Classes

4.30 When special classes were first established they offered the only alternative to regular class placement. Currently there are other options available. Supportive services include regional advisory staff, regulation teachers, resource teachers, learning assistance teachers and teaching aides. Classroom teachers are more adequately trained to cope with individual differences, class numbers have been reduced, and teachers have access to a variety of programmed material which enables children to work at individual levels. While there is no

doubt that more borderline handicapped children are being maintained in regular classrooms, Council considers that there are some children who will need special class placement at some stage of their school life, and that these children will be those with more severe educational and social problems.

4.31 One of the problems which has beset the Special Education Branch in the provision of facilities has been the lack of possibility of forward planning. Reasons contributing to this situation in the past included incomplete data on future needs and restrictions on capital funding both for special and regular education which necessitated a number of *ad hoc* accommodation and siting arrangements. However, estimates of the incidence of intellectual handicap noted in Chapter 2 should provide information on the provision which is likely to be required in any area and more information is now available from preschool sources about the special needs of individual children. Since 1974, when additional funds became available for special education, an increasing amount of forward planning for special schools has been possible and the Council considers that more forward planning for special classes should now be undertaken.

RECOMMENDATION 15 : *In the planning of all new primary and secondary schools classroom space should be allocated for special education programmes.*

4.32 The Council reiterates the principle that where possible borderline handicapped children should be educated in the local school. It is therefore essential that any advance planning should involve the Regional Directorate and Special Education Branch to ensure that full use is made of local resources.

RECOMMENDATION 16 : *Children likely to need special education provision should be referred to the Special Education Branch as soon as their problems are identified.*

RECOMMENDATION 17 : *Regional Directors and the Superintendent of Special Education should coordinate efforts to provide the most appropriate education for intellectually handicapped children.*

4.33 Special class programmes are designed to achieve two major aims. One is to develop to the fullest extent whatever skills and abilities each child possesses. The other is to improve the social competencies which will enable children to use these skills and abilities in everyday life. Unfortunately, it has been generally assumed that this developmental process would not be completed until the end of the period of compulsory schooling, and few special class children have been given the opportunity to use their skills in the everyday life of the regular classroom.

4.34 In recent years many attempts have been made to integrate special class pupils into regular classrooms. Such programmes with younger children in the junior special classes have been successful. Some problems have been experienced with older children in primary special classes. Some of these problems have arisen because the children were insufficiently prepared for integration, others because regular class teachers were not given sufficient information or support to maintain the special class child. The Council considers it essential that every effort should be made to facilitate the integration process. Host schools for special classes must have the resources to enable the objective to be reached. This may require smaller numbers in regular grades, specially selected teachers, or adequate support staff.

RECOMMENDATION 18 : *Children attending special classes should be reviewed regularly and programmes should be designed with the objective of enabling them to integrate with regular grades.*

RECOMMENDATION 19 : *Host schools should be given favourable treatment in the allocation of staff and resources to facilitate the integration of borderline handicapped children into regular grades.*

4.35 Special classes were originally staffed on the basis of one teacher to twenty children and the teacher was responsible for the entire programme. Although programmes are now more flexible and not all children spend all their day in the special class, the Council considers that the increased severity of some of the children's disabilities and the additional demands made upon the teachers require a more realistic teacher-pupil ratio.

RECOMMENDATION 20 : *The teacher-pupil ratio in special classes for borderline handicapped children should be as follows :*

Junior Special Classes	*1:12*
Primary Special Classes	*1:15*
Secondary Special Classes	*1:20*

Teacher Education

4.36 A Commonwealth Committee of Inquiry (Auchmuty) and a State Committee of Inquiry (Vickery) are at present examining teacher education. Because of this the Council thought it inappropriate to discuss teacher education at length in this report. However, the report would not be complete without some reference to teacher education and the recommendations listed below are included because we believe that some comment is necessary.

4.37 The Council knows that during the past five years colleges and universities providing general teacher education courses have become more aware of the need to give all pre-service students some appreciation of the range of abilities and disabilities of the children they expect to teach after graduation. One assumption underlying traditional courses

of teacher education has been that it was sufficient to prepare teachers to teach children whose abilities did not depart significantly from a restricted range centred on so-called *average* ability. It would be quite unrealistic to suggest that in pre-service courses it is possible to introduce student teachers to all the methods appropriate for every kind of disability. Even so, the Council considers that all practising teachers should have some knowledge of the characteristics and needs of exceptional children. It is also suggested that all teachers should have some knowledge of the methods suitable for teaching exceptional children and access both to advice and to in-service courses related to the education of atypical children.

RECOMMENDATION 21 : *A compulsory special education component should be included in all pre-service teacher education courses so that new graduates will have some knowledge of the characteristics and needs of atypical children. Further, the institutions should provide a reasonable range of optional or elective courses in special education so that these are available for student teachers.*

4.38 The Council considers that the Education Department, colleges and universities should cooperate in providing in-service courses in special education.

RECOMMENDATION 22 : *Both in country areas and in the metropolitan area, in-service courses in a variety of aspects of special education should be provided for teachers in special schools and regular schools. The employing authority should encourage teachers to attend these courses.*

4.39 During the past five years a variety of graduate teacher education courses has become available in Western Australia. Several of these courses relate to special education, and the Council considers that teachers should be encouraged to study special education at the graduate level.

RECOMMENDATION 23 : *Teachers of intellectually handicapped and borderline handicapped children should be encouraged to obtain a recognised graduate qualification in special education. Graduate courses should contain theoretical and practical components and should be available to teachers in metropolitan and rural areas.*

Teacher Qualifications and the Employment of Teachers

4.40 All teachers in special schools for the intellectually handicapped are paid a special allowance, whether the teacher holds a special education qualification or not. However, no allowance is paid to any teacher in a special class for the intellectually handicapped within a regular school. Because of this a teacher in a special school who holds no qualification in special education is paid an allowance while a teacher in a special class who does have a special education qualification is paid no allowance. The Council believes that this state of affairs should be changed and in the recommendations which follow suggests that all teachers with graduate qualifications in special education should be paid an allowance while teaching intellectually handicapped children.

4.41 As there is now a range of graduate courses in special education in Western Australia the Council considers that it is a reasonable expectation that all teachers working with handicapped children should hold such a qualification,

and so improve the level of education of teachers working in this field. Available data indicate that fewer than half of the teachers working with intellectually handicapped children in Western Australia hold a graduate qualification in special education. The Council considers that an appropriate qualification in special education should be a major criterion in the selection of teachers for work in this field. The continued employment and promotion of teachers working in special education should be based on both proven competency and appropriate graduate qualifications.

RECOMMENDATION 24 : *After 31 December 1983 all new teachers appointed or recruited to work with handicapped children should have completed an appropriate graduate qualification in special education.*

RECOMMENDATION 25 : *After 31 December 1983 the allowance payable to teachers in special schools should be discontinued, and a new allowance should be paid only to special education teachers with an appropriate graduate qualification. This allowance should be paid to teachers in special classes and special schools.*

RECOMMENDATION 26 : *The promotion of teachers working in special education should depend on an appropriate graduate qualification and successful professional experience.*

Technical Education

4.42 On leaving school many opportunities for further education are open to non-intellectually handicapped adults in academic and practical skills, and in hobby and recreational fields. Continuing education in literacy and numeracy is available to intellectually handicapped adults on an organised basis for those who attend activity therapy

workshops and some provision is made by the Division for the Intellectually Handicapped in residential hostels. Many opportunities for further education are provided by the Technical Education Directorate of the Education Department. Although it appears to be the case that there are no formal barriers against intellectually handicapped persons enrolling in hobby or recreational type courses, there appears to be no encouragement for them to do so. Courses in basic literacy and numeracy are available through the Technical Education Directorate but have been developed for non-intellectually handicapped adults. The following recommendations are made on the grounds that if intellectually handicapped adults are able to profit from courses provided by the Technical Education Directorate, they should have access to a range of suitable courses.

RECOMMENDATION 27 : *Wherever possible the intellectually handicapped should be given the necessary support to enable them to attend courses of post-school education. The Technical Education Directorate should set up a standing committee to facilitate the development of additional appropriate programmes.*

RECOMMENDATION 28 : *Continuing courses in functional literacy and numeracy should be provided by the Technical Education Directorate for those intellectually handicapped persons who wish to maintain and develop these necessary skills.*

Diagnosis and Assessment

4.43 There has been much controversy about the procedures used to diagnose and assess intellectual handicap. Particular exception has been taken by some psychologists to the use of IQ test scores in determining educational placement.

In Chapter 2 reference was made to the inherent dangers of labelling, and reference was also made to the need for more than one measure of development.

4.44 The controversies have led some professionals to abandon the use of standardized intelligence tests and to rely upon other forms of measurement, particularly the observation of behaviour in specific situations. While the Council recognises the limitations of available IQ tests it also recognises that observations of overt behaviour are often unreliable as indicators of overall intellectual functioning. It is the Council's view that assessment procedures should include measurements of all aspects of social and intellectual functioning and that assessments should be made by qualified professionals.

RECOMMENDATION 29 : *Children should have the benefit of thorough assessment by qualified personnel before any special education is recommended.*

Records in Regular and Special Schools

4.45 Detailed record keeping by teachers of their pupils' progress is increasing and contributing valuable information which may be used to improve assessment and review procedures for educational programme planning and placement. It can, of course, be the case that too much time is spent in keeping very detailed records to the detriment of actual teaching. It is also the case that many special school and special class teachers already maintain adequate record systems for intellectually handicapped children. In making a recommendation that progress records be kept on the progress of each

intellectually handicapped pupil requiring special education, the Council does not consider that it is adding significantly to the work load of the teachers but it is stressing the value of up-to-date factual information on children's educational progress being available at all times. It is considered that the type of material to be included in the pupils' records should include basic information such as date of birth, schools previously attended, samples of work, and details of classroom testing, but the actual format should be worked out by the Special Education Branch in consultation with principals and special class teachers. This factual record should be available to all teachers, advisory staff, guidance officers and parents.

RECOMMENDATION 30 : *A personal folder, containing records of progress and other factual information should be maintained for every intellectually handicapped child, whether enrolled in a special or regular school.*

4.46 In addition to the information which should be recorded in the personal folder it is often necessary for confidential and sensitive information which is vital to an understanding of a child to be recorded and be available within a school, but only to a limited number of persons. Such information should be recorded in a second limited circulation folder which should be kept in a secure place at all times.

RECOMMENDATION 31 : *The results of professional consultation and sensitive information given in confidence about a child's medical, social and psychological status should be recorded in a separate confidential folder. The folder should be kept in the school and access to it controlled by the principal.*

Case Conference Reviews

4.47 It is considered that accurate and systematic record keeping of the kind referred to above will enhance continuous assessment of pupils' progress and facilitate programme changes where necessary. While continuous assessment in the sense of constant awareness of pupils' performance and readiness to change programmes as pupils' needs change is a goal for all teachers, we believe it is possible in the classroom situation for a need for change to be overlooked on occasions. For this reason it is considered that a formal requirement for an annual review of each pupil should be instituted. By annual review the Council does not mean necessarily a full scale interdisciplinary reassessment. For a small number of children in each year a more comprehensive review might be indicated, but not necessarily the same children in each year. The Council believes parents should be asked to participate in such conferences and should be given a written report on the progress of their children.

RECOMMENDATION 32 : *The progress of all intellectually handicapped children should be reviewed each year and the principal, whether of a regular school or of a special school, should be responsible for initiating the review. The parents of each handicapped child should be requested to attend these review conferences and should be given a written report of their child's progress.*

CHAPTER FIVE

PRESCHOOL EDUCATION FOR INTELLECTUALLY HANDICAPPED CHILDREN

5.1 Preschool education in Western Australia is supervised by the Early Childhood Branch of the Education Department which is responsible for preprimary centres at state primary schools, community based preschools and for the registration and supervision of private kindergartens for children over three years of age. The Department of Community Welfare (Early Childhood Services) registers and supervises day care services. Some day care centres provide kindergarten programmes for children aged three to five years. It is general practice that children commence school in February of the calendar year in which they turn six although immature children may be retained in kindergarten for an extra year on exemptions granted at the request of guidance officers, preschool advisory teachers, school principals, medical practitioners, occupational therapists, speech therapists, psychologists, social workers, and other professionals.

5.2 Preschool education is voluntary in Western Australia. While preschool education for normal children mainly caters for children aged four and five years some Education Department special schools have programmes for intellectually handicapped children from the age of three.

5.3 Because preschool education is not compulsory and because the involvement of the Education Department is limited mainly to the immediate preschool year there has been a proliferation of facilities and programmes for infants and young children, which may be deemed educational in the broad sense. These include day care and occasional care centres, play groups and play centres, and private nursery schools and kindergartens. A number are run by parent committees and organisations on a non-profit basis. Some are subsidised by state, federal and local government funds, and others are privately run and charge fees. While all such centres must be registered with the appropriate authorities and all are subject to some degree of supervision, the quality of facilities and programmes varies considerably, particularly in those centres providing for children under four years of age.

5.4 Many intellectually handicapped children have been enrolled by parents in playgroups, day care centres, private kindergartens or other facilities, sometimes on the recommendations of professional persons. As there is no requirement at present that parents register their retarded children, or that those conducting preschool programmes should notify the Education Department or the Division for the Intellectually Handicapped of the presence of handicapped children in their centres, many children with special education needs are not identified until they enter either a regular kindergarten or Year 1 at primary school. This has caused problems not only of adequacy of care, training and therapeutic treatment, but also has made it difficult to predict enrolments in special education programmes. While it is not desirable to legislate for mandatory registration of handicapped children as has been done in the United States and other countries, it may be an advantage to encourage professionals in all areas to advise the Education Department, subject to parental permission, of the possible educational needs of these children. At present there tends to be a

wait and see attitude among some professionals and a tendency for some organisations which provide early intervention programmes to withhold information about such children until they are to be enrolled at school and then to request placement in specific schools or classes.

RECOMMENDATION 33 : *Medical and other professional practitioners both in private practice and in public institutions should be requested to advise the Special Education Branch of the Education Department of the names, ages and addresses of any handicapped preschool children, subject to parental permission.*

RECOMMENDATION 34 : *The right of parents of handicapped preschool children to make a direct approach to the Special Education Branch for advice and assistance should be widely publicised.*

5.5 A problem associated with the multiplicity of preschool facilities is that intellectually handicapped children may be enrolled in more than one programme. It is the policy of some organisations to utilise community and private preschool and day care centres and playgroups in their normalisation programmes. This means that statistics are unreliable and confusing as the same children may appear on more than one list. Some professionals have, with the best of intentions, made arrangements which were inappropriate in terms of the developmental level of the child, and unrealistic in terms of the ability levels of other children in the preschool centre, and the teacher's knowledge and experience. Early notification as previously recommended would clarify the situation, allow for more realistic planning, and reduce the number of *ad hoc*, and sometimes inappropriate decisions which have been made. Full investigation and informed planning are essential. The problem of over-servicing could be lessened if decisions about programmes for children were made by committees of representatives of the services providing facilities, the referring professionals, the children's parents

and the teachers who will be involved. Parents are likely to be confused if given contrary advice and information by a variety of *experts*, and the effect on the children involved in several different programmes is likely to be counter-productive. The present system is uneconomic. There is a wastage of time by professionals and support staff. There is also unnecessary duplication in the establishment and maintenance of more than one set of facilities.

RECOMMENDATION 35 : *Inter-disciplinary committees including an Education Department representative should be convened to coordinate the educational planning for handicapped preschool children so that duplication is minimised.*

Preschool Education Services Centre
Early Childhood Branch

5.6 Preschool education is provided in preprimary classes attached to primary schools and in community preschool centres. The latter were formerly managed by the Western Australian Preschool Board which had a tradition of giving priority in enrolments to children with special needs, including the intellectually handicapped. A referral system and advisory service organised by trained teachers experienced in work with handicapped children was located at the Board's administrative headquarters and was used extensively by medical personnel, social workers, community health and community welfare officers and others working with young children, and by teachers accepting special case children into their preschools. This service was well known, well used and respected.

5.7 When the Education Department assumed control of the community preschools in 1976 and reorganised the preschool and preprimary services to form the Early Childhood Branch, the special case

referral system was retained and extended to include special referrals to preprimary classes. This resulted in a considerable increase in referrals so that currently well over 1,000 special needs cases are referred annually. Special needs covers not only physical and intellectual handicaps but such diverse problems as severe speech defects, delayed language development, foreign language background, social, emotional and behavioural problems and parent relief. Intellectual handicap, more specifically mental retardation, is the referral label attached to between some 40 and 50 children each year when requests are made for special places. Most of these children are given trial placements. Up to two special case children may be enrolled in each group of 25 children. If there are no serious problems, and if the teacher has sufficient help, the child may be retained in the preschool for up to two years.

5.8 In the context of the current trend for normalisation and integration in the care and education of the handicapped, the preschool services are providing valuable help to a sizable proportion of known intellectually handicapped children. Few preschool teachers have had any training for work with handicapped children, although a ten week inservice practical course is available for a limited number of selected teachers at the Child Study Centre (Exceptional Children's Project), University of Western Australia, which is financed by the Early Childhood Branch and is under the direction of Associate Professor Audrey Little.

Country Services

5.9 While the Early Childhood Branch attempts to provide special places for intellectually handicapped children in country areas there are far fewer advisory and support staff available and there are children who are not receiving help. There is need for some additional service to be provided so that advisory help, extra support staff and inservice training are available for preschool teachers providing integrated services for country children.

5.10 Children in rural areas who require special case placement represent a problem which is not easily overcome, even though it may be possible for the Early Childhood Branch to incorporate some special case assistance through their Isolated Children's Programme. Alternatively, the Special Education Branch might include preschool children if services are planned for handicapped children of primary school age who are unable to attend special classes.

5.11 In rural areas some children are too handicapped for placement in country preschool centres and some of these children attend day activity schools conducted by the Slow Learning Children's Group. These family type centres provide care, social training and family support to children who would otherwise be home-bound, but the age range may include children from three years to over eighteen years, and the service provided for preschool children may not be very suitable in view of, this age distribution.

5.12 The special case referral system needs investigation and reorganisation. The numbers are so great that the present staff cannot thoroughly investigate each case, and placement is sometimes made without sufficient information. In paragraph 5.7 reference was made to the fact that well over 1,000 special needs cases are referred annually. Of this total, at the time of first referral, the intellectually handicapped represent only 40-50 children and such referrals are probably the most deviant in their level of maturity and their special needs. Many children who are referred with delayed language, cerebral palsy, epilepsy, hyperactivity and other disorders are in fact also intellectually handicapped and teachers concerned with them may be faced with more complex problems than may have been anticipated.

RECOMMENDATION 36 : *The special case referral system should be reorganised as part of the Special Education Branch so that referrals*

are dealt with by developmental psychologists. Social workers and experienced preschool teachers with additional training with handicapped children should supply advisory and support services.

5.13 The staff of the Early Childhood Branch estimates that half of the special referrals are for children with speech defects and language problems. It is essential that trained speech pathologists provide diagnostic assessment and speech therapy services to children referred for enrolment in the regular preschools. Intellectually handicapped children are particularly prone to language difficulties and teachers need help in meeting their needs.

RECOMMENDATION 37 : *The Education Department should employ speech pathologists to assess preschool children who have been referred because of language problems, to plan individual programmes and to advise teachers how to assist these children.*

Preschool Classes at Special Schools

5.14 Unlike regular kindergartens the special school preschool groups enrol children from the age of three years. These children are accepted on referral from the Division for the Intellectually Handicapped, Princess Margaret Hospital, the Guidance Branch of the Education Department and the Child Development Centre (Child Health Services) after assessment. Most referrals come from the clinics conducted by the Division and, as the regional therapy units conducted by the Division run early intervention and therapy programmes, there is overlap with many children attending both special school preschool groups and therapy sessions conducted by the Division for the Intellectually Handicapped. As this Division has a strong

commitment to normalisation, many of the moderately and mildly intellectually handicapped children are referred directly to the Early Childhood Branch for a special case placement in a regular kindergarten. Thus only very young (three-year-olds and four-year-olds) and severely retarded children are directed to the special school preschools. As many of these children are developmentally below the two year level and few have any usable speech, programmes which should be preparing children for entry into the primary section of the special schools are, in essence, early intervention programmes training very retarded children in basic self-help skills, in language acquisition and communication skills. Many of these same children also attend therapy units which concentrate on similar basic self-help and language skills, and there is considerable overlap in programmes which has caused confusion both to parents and children. The level of professional cooperation between persons employed in different services working with the same children has been reasonably good, but some differences of opinion have caused conflicts and these would seem to be inevitable where there is overlap in programmes. This type of duplication of services is wasteful both of professional time and of government funds.

5.15 There is a need for a re-appraisal of the role of preschool groups at special schools. If the policy of normalisation is likely to continue in the Division for the Intellectually Handicapped and only severely handicapped children are directed to the special school preschool groups, it may be that the Division should be responsible for providing day centre care and training for these children in its therapy units. This would free staff and space at the special schools for other purposes. At present many children come to the special schools after a year in regular kindergarten while some

of the low ability children from the special school preschool groups move into day activity centres conducted by the Slow Learning Children's Group. Much of the teachers' work in the special school preschool classes, although helpful to the children, may not be appropriate in preparing them for subsequent placement.

RECOMMENDATION 38 : *The Special Education Branch should reappraise the role and effectiveness of the special school preschool groups in consultation with the Division for the Intellectually Handicapped so that duplication of services and confusion of roles is eliminated.*

Special Purpose Preschools

5.16 There are several preschool groups for which the Early Childhood Branch has some supervisory and administrative responsibility. There are four categories of such schools.
Preschools attached to schools for other exceptional children.
These include the integrated preschools at the Speech and Hearing Centre, Wembley, and the preschool in the Buckland Hill Special School. Preschool groups are attached to the Department of Community Welfare's facilities at Bridgewater (Applecross) and at the McCall Centre (Mosman Park). There is also a training programme at the Cottesloe School for Children with Impaired Hearing which includes preschool educational activities. These programmes accept children with intellectual handicaps providing such handicaps are associated with the physical defect for which the schools provide special services.
The Exceptional Children's Project at the Child Study Centre, University of Western Australia.
Currently 20 children are enrolled in the Centre on a part-time basis (two to three sessions a week) and eight others who formerly attended the Exceptional Children's Group are in the regular child study centre kindergartens and are still supervised by the project staff. Approximately two thirds of these children have some degree of intellectual handicap.

Prelanguage centres associated with preprimary centres at Highgate, Beaconsfield and South Fremantle.

Although these centres are primarily for children with foreign language backgrounds a few intellectually handicapped children are among those enrolled.

Special purpose preprimary groups.

There are two such groups; one is at Lathlain and the other at Tarcoola (Geraldton) and both are in the experimental stage. These cater for problem children unable to be accepted into the regular preprimary classes because of physical, social, emotional or intellectual problems. Each group can cater for up to eight children, some of whom are intellectually handicapped.

5.17 Most of the above programmes are multipurpose and not specifically directed towards the education of intellectually handicapped children. However as developmental deviations tend to affect many aspects of these children's behaviour and learning ability many of the children attending these centres must be regarded as borderline or intellectually handicapped. The main problem encountered in establishing and maintaining these groups is that of transport and more children could be served if transport were provided.

RECOMMENDATION 39 : *The Education Department should give more assistance in transporting preschool intellectually handicapped children to educational facilities.*

Staff Training

5.18 Many early childhood teachers are providing good opportunities for the education of intellectually handicapped children. However, most of these teachers require additional knowledge and training. They also need assistance from qualified advisory staff and sufficient support staff should be appointed to provide this service.

RECOMMENDATION 40 : *Preservice early childhood teacher education courses should include an emphasis on the development both of normal and atypical children.*

RECOMMENDATION 41 : *Practising preschool teachers should be given opportunities to participate in inservice training, preferably with emphasis on practical work.*

RECOMMENDATION 42 : *Advisory staff in the early childhood education field should be required to have qualifications in special education together with practical experience in dealing with handicapped children.*

Early Intervention Programmes and Therapy Services

5.19 The Division for the Intellectually Handicapped provides a range of therapy services which are either home-based or centre-based. Services include occupational therapy, speech therapy, physiotherapy and training in social skills in individual and group situations. Many of these programmes are under strain because of inadequate staff and few of these services are making sufficient impact in the schools. Much of the content both of therapy programmes and intervention programmes can be labelled education, and as the same children are often involved in out-of-school therapy programmes and preschool programmes, there is confusion, duplication and some conflict between members of different professions who may have differing training, loyalties and points of view. Therapists are trained to work with individuals and to plan what they consider will be of optimum benefit for the individual client. Teachers are responsible for up to 25 preschool children and must consider the total effect of the school situation, both on the particular child and on all of the children in the group. Inevitably problems arise and often the particular child and his family are confused by the multiplicity of services. In some districts there is a multitude of services, and in some country and outer suburban districts services are poor.

RECOMMENDATION 43 : *Additional occupational therapists, physiotherapists and speech pathologists should be employed to provide a coordinated service for preschool children who need therapy.*

Additional Early Intervention Services

5.20 Other preschool training and educational programmes are available at the Princess Margaret Hospital, at the Child Development Centre (Rheola Street, West Perth), at the Sir James Mitchell Spastic Centre and the Mildred Creak Autistic Centre, and the Department of Youth, Sport and Recreation has recently entered the field of providing education and support at home for parents of handicapped children.

Private Schools and Associated Kindergartens

5.21 The Catholic Education Guidance service supervises the programmes of special case placement children accepted in Roman Catholic schools and kindergartens. At present the number of children with intellectual handicaps enrolled in these schools is not great, but it is increasing as the concept of community care and integration of the handicapped gains wider acceptance. Other private schools accept mildly retarded and borderline children in their kindergarten and junior classes.

Private Kindergartens and Day Care Centres

5.22 An unknown number of intellectually handicapped children attend sessional preschool or day care centres. The quality of the programmes offered, and the qualifications of staff varies widely. Most severely handicapped children are identified and referred for diagnosis and treatment by officers of School Health Services and

Community Health Services, or by advisory staff, but many mildly retarded children remain without expert advice or assistance and are not identified until they start primary school thus delaying early intervention.

Handicapped Children Not Receiving Preschool Education

5.23 In spite of the range of facilities available, the parents of some intellectually handicapped children do not make contact with informed people who might refer the child for assessment and education. Community Health personnel and hospital staff need to be encouraged to identify children who may need specialist help and should encourage the parents of such children to seek advice and special education assistance. Parent and community education and media services could be used to better advantage to give information not only about the problems of intellectual handicap, but also to advise where help, support and training may be obtained. While this area does not seem to be the responsibility of the Education Department, it is suggested that this Department could support and contribute material for such public education programmes.

RECOMMENDATION 44 : *The Minister for Education should take further action to publicise the preschool and therapy services which are available for intellectually handicapped preschool children.*

CHAPTER SIX

EDUCATION OF SEVERELY AND PROFOUNDLY RETARDED CHILDREN

6.1 It has been common practice for intellectually handicapped children in special classes to be described as *educable*, those in special schools as *trainable* and those in day activity schools as *ineducable* or *untrainable*.

> ...it was a distinction about the presumed level to which children could be educated. The ability to attain functional literacy separated the *educable* from the *trainable*. The dual criteria of bowel and bladder control and functional language acquisition divided the *trainable* and *untrainable* (Reynolds and Birch, 1977, p.97).

Such terms are not now as widely used in Western Australia as they were in the past, but they do continue to affect the kind of educational provision made for severely and profoundly handicapped children. The use of the terms *ineducable* and *untrainable* has been particularly unfortunate because it suggests that the more severely handicapped are incapable of benefitting from education. Most authorities now indicate that the distinction between the *trainable* and *untrainable* intellectually handicapped does not serve a useful purpose.

6.2 Over the past 20 years research with severely and profoundly intellectually handicapped persons has shown that they can learn (Berekson and Landesman-Dwyer, 1977). If taught by selected procedures, these persons may learn self-help, independence and language skills.

Day Activity Schools and Institutional Training Classes

6.3 A day activity school is a school for the profoundly and severely retarded operated by the Slow Learning Children's Group or the Division for the Intellectually Handicapped. For the purposes of this report, we define an institutional class as a unit organised in an institution, neither operated nor staffed by Education Department personnel.

6.4 Most of the severely and profoundly retarded children enrolled in day activity schools or institutional classes have never attended Education Department special schools. However, some of the children in such programmes have been excluded from special schools because Education Department staff have considered that more appropriate programmes are offered in the day activity schools or institutional classes.

6.5 At the present time exclusion of children from Education Department schools because of poor adjustment or limited achievement does not necessarily mean that such children must remain at home during the school day, or be denied government funds for training and care. The state and commonwealth governments provide funds to voluntary agencies and to government departments other than the Education Department for day or residential facilities for such children. Some intellectually handicapped children living in isolated areas may not have access to these services.

6.6 The Education Act Amendment Act No 2 of 1976 removed the requirement that parents of handicapped children provide a *suitable* education for them but left the Minister with the power to exclude intractable or untrainable children from government schools. Although parents are not legally required to provide *suitable* education for handicapped children, in practice if a child is excluded from any government school and the parents are convinced that the child should be given an opportunity to learn, however

slowly, they must arrange alternative educational provision. Most of these profoundly and severely handicapped children are receiving therapeutic treatment or instruction of some kind. In some cases parents must pay fees, for example in the case of a parent of a severely retarded child attending a private day care centre. In other cases, for example in the day activity schools conducted by the Slow Learning Children's Group, the programmes are heavily subsidised by governments, but parents pay a membership fee and may become involved in substantial fund raising. Other programmes are provided free by state government departments other than the Education Department, for example programmes at the Pyrton Training Centre which are controlled by the Division for the Intellectually Handicapped.

Provision of Educational Services for Severely and Profoundly Retarded Children

6.7 Two opposing points of view have been presented to the Council on the education of severely and profoundly handicapped children. One takes the broad view of education referred to in the introduction to this report. This view is that the Education Department should assume responsibility for the education of all handicapped children, including severely and profoundly intellectually handicapped children. Supporters of this view see special education teachers as having a role to play in all situations involving structured learning. They contend that as the Education Department is the government instrumentality established to provide public education, this department should be responsible for providing appropriate learning programmes for all children of compulsory school age, on the grounds that all intellectually handicapped children can benefit from appropriate special education programmes.

6.8 A second view has been put to the Council that the Education Department should not assume responsibility for the education of all severely and profoundly intellectually handicapped children since the learning needs of these children cannot be catered for in special education classrooms as they are presently constituted. Those supporting this view suggest that the goal of the learning activities appropriate for some of these children may be more aptly described as the development of basic self-care skills rather than education, and emphasize the lack of expertise of Education Department staff in this area compared with that of persons at present providing such programmes. It has also been indicated that many of these children are in need of nursing care for much of the school day, and that some of these children are bed-bound and incapable of participating in group activities.

6.9 There are a number of organisational problems which must be overcome if the Education Department is to become involved in the education of severely and profoundly intellectually handicapped children. The Council wishes to focus on the major problems of organisation and funding, the age range in day activity schools and staffing.

Organisation and Funding

6.10 Evidence presented to the Council indicates that if the state government through the Education Department were to assume responsibility for the education of children attending day activity schools, commonwealth funding at present made advailable to the Slow Learning Children's Group for capital works and staff salary subsidies through the Department of Social Security under the terms of the *Handicapped Persons Assistance Act*, 1974 would cease, and the funds lost would have to be replaced from state government sources.

6.11 The particular problem of State Education Departments which provide special education facilities for handicapped children was noted in 1973 in the *Report of the Interim Committee of the Australian Schools Commission.* The problem is that State Education Departments are unable to obtain funds under the terms of the *Handicapped Persons Assistance Act*, 1974. There is also overlap between the Schools Commission Special Education Programme and the educational funding controlled by the Department for Social Security and this was again alluded to in the *Report of the Schools Commission*, 1976-1978. Among the recommendations which the National Advisory Council for the Handicapped made to the Federal Minister for Social Security in 1978 was one that "the education of handicapped children should be the responsibility of education authorities and accordingly should be funded from that source rather than through the Handicapped Persons Assistance Act" *(Second Report of the National Advisory Council for the Handicapped*, 1978, p.12). Under the present arrangements the commonwealth assistance scheme acts as a disincentive to state governments because of the way commonwealth funding is made available to voluntary agencies providing educational programmes for handicapped persons. This matter was noted by the South Australian Committee on the Rights of Persons with Handicaps. The Committee, in discussing education stated :

> 21. We have been advised that Commonwealth funding policy is not assisting the normalisation principle being pursued in South Australia. Under the *Handicapped Persons Assistance Act (Commonwealth)*, funds are given to approved organisations, including special non-government schools. If the services provided by these schools are taken over by the State Education Department and provided within normal state school environments, the Commonwealth funding mentioned stops. The Education Department in pursuing this admirable principle of normalisation then must rely upon Schools Commission grants, with no guarantee that special attention will be paid to the extra responsibility undertaken with respect to children with disabilities.

> 22. Even if the Education Department wishes to help Special non-government schools, such as the S.A. Oral School, and gives funds (for the salaries of staff for instance) the Commonwealth Handicapped Persons Assistance Act compels the federal Minister for Education (sic) to reduce commonwealth funds to that school by the amount granted by the state. In each case, the handicapped child is the loser, a situation which needs urgent resolution,(*The Law and Persons with Handicap*, Vol I, pp.125-126).

These comments are fully applicable to the situation of the Western Australian Education Department and its relationship with the day activity schools.

Age Range in Day Activity Schools

6.12 Although the initial aim of the day activity schools was to provide facilities for intellectually handicapped children who were of compulsory school age but who were not attending Education Department schools, the lack of preschool facilities resulted in some children who were below school age being enrolled. It now appears that because of a lack of suitable facilities, particularly in country areas, persons above compulsory school age are continuing to be enrolled at day activity schools. In June 1979 26 per cent of the 169 persons enrolled in day activity schools were in the age range of 19-46 years, with the widest age range at any day activity school being 4-46 years at one country centre. While some of these older persons may be capable of continuing to learn a little the Council considers it inappropriate that four year-olds should be associating regularly with older persons in a small facility. The Council considers that the provision of suitable facilities for severely and profoundly intellectually handicapped persons over nineteen years of age should be the responsibility of agencies other than the Education Department. The increase in life expectancy of intellectually handicapped persons suggests that there will be an increasing need for day facilities for such intellectually handicapped persons who are above the normal school leaving age.

Staffing

6.13 Few staff with teaching qualifications recognised by the Education Department are involved directly or indirectly in day activity schools or in institutional classes. Some staff have received training and are qualified as social trainers. Others are untrained except for on-the-job experience. A few staff have had training overseas, mainly in Britain. Professional staff employed by the Division for the Intellectually Handicapped, such as occupational therapists, physiotherapists, speech pathologists, psychologists and medical officers, are involved in the programmes of day activity schools and institutional classes. This involvement is often very limited or non-existent in country areas.

6.14 If the Education Department were to assume responsibility for the day activity schools, the following matters related to staffing would need careful examination.

1. Employment conditions and training for staff at present employed by the Slow Learning Children's Group.

2. Suitable training for Education Department staff.

3. Staff-student ratios.

4. Employment of professional staff other than teachers.

5. Emplcyment and status of social trainers in relation to trained teachers and teacher aides.

One solution to this problem of staffing may be to incorporate social trainers into the Education Department's staffing and classification system.

Day Activity Schools and Special Schools

6.15 After setting general educational goals, the Warnock Committee suggested that special education should be understood in terms of one or more of three criteria:

(i) effective access on a full or part-time basis to teachers with appropriate qualifications or substantial experience or both;

(ii) effective access on a full or part-time basis to other professionals with appropriate training; and

(iii) an educational and physical environment with the necessary aids, equipment and resources appropriate to the child's special needs *(Report of the United Kingdom Committee of Enquiry into the Education of Handicapped Children and Young People,* 1978, p.47).

If special education is understood in terms of these criteria, which are consistent with the service needs of intellectually handicapped persons, then it seems reasonable to conclude that the Special Education Branch of the Education Department should have a role in the provision of educational assessment services and advisory services for severely and profoundly intellectually handicapped children. However, this does not mean that the Education Department must necessarily become responsible for the care and training of all these children particularly as nursing care is more appropriate for some. It must become responsible for ensuring that trained educational staff are available on request to assist in developing the educational component of structured programmes which are appropriate for these children.

6.16 The Council supports the principle that the Education Department should be responsible for the education of many of the severely and profoundly intellectually handicapped school age children at present attending day activity schools. However, the Council does not recommend that this responsibility should be assumed

until present funding arrangements are changed. It seems necessary that funds should be directly available to the state government and that the commonwealth government should change present procedures so that this becomes possible. The Council also believes that the Education Department should satisfy itself regarding staffing problems related to day activity schools and the placement of persons over school age in such schools before it becomes directly involved in this field.

6.17 It is also recognised that because there are programmes at present available for severely and profoundly intellectually handicapped children, any additional provision by the Education Department for the educational needs of these children must be made in close consultation with the agencies which are at present providing programmes. In particular, it is important that there should be a continuation of the present medical and allied health services to these children.

RECOMMENDATION 45 : *The Education Department should assume responsibility for the education of severely and profoundly intellectually handicapped children of school age capable of attending day activity school programmes, but only after the commonwealth government changes its present policy of funding educational programmes under the Handicapped Persons Assistance Act (1974).*

RECOMMENDATION 46 : *Prior to the Education Department assuming additional responsibility for the education of severely and profoundly intellectually handicapped children of school age, consultation should take place with other agencies providing services for these children to ensure that service provisions are adjusted accordingly, adequate medical and allied health services provided, and adequate classroom space made available.*

RECOMMENDATION 47 : *Prior to the Education Department assuming responsibility for the education of severely and profoundly intellectually handicapped children of school age, staff selected for this area of special education should receive adequate training and in-service education.*

RECOMMENDATION 48 : *For those severely and profoundly intellectually handicapped school age children who are incapable of attending day activity schools, special education programmes within institutions should continue to be organised by the Division for the Intellectually Handicapped and by voluntary agencies. The Education Department should provide professional educational assessment and educational advisory services on request.*

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APPENDIX I

SUMMARY OF RECOMMENDATIONS

RECOMMENDATION 1 : *Such labels as intellectually handicapped, borderline handicapped and dull-normal should not be used outside a clearly defined professional setting. Children of limited intelligence should not be hampered by a label, but should instead be encouraged and assisted to normalise their status and social relationships in the school and community.*

RECOMMENDATION 2 : *The Minister for Education should encourage regular meetings between senior persons from government departments and from voluntary agencies to discuss the coordination and development of services for the intellectually handicapped.*

RECOMMENDATION 3 : *The Minister for Education should give support to periodic public meetings in city and country areas to provide forums for the transmission of information and for the discussion of areas of concern to parents.*

RECOMMENDATION 4 : *Principals of regular schools should take an active role in establishing relevant educational programmes for dull-normal, borderline and intellectually handicapped pupils.*

RECOMMENDATION 5 : *Within the established staffing formula, the Education Department should select or appoint at least one teacher to each subject department in all secondary schools to organise programmes for dull-normal, borderline and intellectually handicapped pupils. These teachers should have proven competency in a subject discipline and some special education training.*

RECOMMENDATION 6 : *Within the established staffing formula, the Education Department should select or appoint at least one teacher to every Class IA, Class I and Class II primary school to organise programmes for dull-normal, borderline and intellectually handicapped pupils. These teachers should have proven competency in primary teaching and some special education training.*

RECOMMENDATION 7 : *Special schools for the intellectually handicapped should be staffed on the basis of one trained teacher to every ten pupils and one teaching aide to every 20 pupils. There should be sufficient flexibility in this staffing formula to allow for a lower teacher-pupil ratio in schools which can demonstrate an enrolment of a higher proportion of multiply handicapped, severely or profoundly handicapped pupils.*

RECOMMENDATION 8 : *Special schools for the handicapped should be classified on the basis of teacher numbers rather than pupil numbers. The Council recommends that special schools for the handicapped be classified on the following basis.*

Class III up to 5 staff including the principal
Class II 6-10 staff including the principal
Class I 11-15 staff including the principal
Class IA 16+ staff including the principal

RECOMMENDATION 9 : *Separate schools should be provided wherever possible for junior and senior students, or buildings should be designed to allow a clear differentiation between the two groups.*

RECOMMENDATION 10 : *No special school should be built to accommodate more than 180 intellectually handicapped students.*

RECOMMENDATION 11 : *The need for special education facilities should be recognised at all stages of planning for regular schools. We also recommend that where practical all future special schools for the intellectually handicapped be located on the campuses of regular schools.*

RECOMMENDATION 12 : *The secondary component in the programmes of special schools for the intellectually handicapped should be recognised in the allocation of supplies.*

RECOMMENDATION 13 : *Both in country areas and in the metropolitan area the length of the school day in special schools for intellectually handicapped students should be the same as that in regular schools, with scope for variation according to the ages and needs of the students.*

RECOMMENDATION 14 : *Programmes in functional literacy and numeracy should be included in the curricula of all special schools for the intellectually handicapped.*

RECOMMENDATION 15 : *In the planning of all new primary and secondary schools classroom space should be allocated for special education programmes.*

RECOMMENDATION 16 : *Children likely to need special education provision should be referred to the Special Education Branch as soon as their problems are identified.*

RECOMMENDATION 17 : *Regional Directors and the Superintendent of Special Education should coordinate efforts to provide the most appropriate education for intellectually handicapped children.*

RECOMMENDATION 18 : *Children attending special classes should be reviewed regularly and programmes should be designed with the objective of enabling them to integrate with regular grades.*

RECOMMENDATION 19 : *Host schools should be given favourable treatment in the allocation of staff and resources to facilitate the integration of borderline handicapped children into regular grades.*

RECOMMENDATION 20 : *The teacher-pupil ratio in special classes for borderline handicapped children should be as follows :*

Junior Special Classes	*1:12*
Primary Special Classes	*1:15*
Secondary Special Classes	*1:20*

RECOMMENDATION 21 : *A compulsory special education component should be included in all pre-service teacher education courses so that new graduates will have some knowledge of the characteristics and needs of atypical children. Further, the institutions should provide a reasonable range of optional or elective courses in special education so that these are available for student teachers.*

RECOMMENDATION 22 : *Both in country areas and in the metropolitan area, in-service courses in a variety of aspects of special education should be provided for teachers in special schools and regular schools. The employing authority should encourage teachers to attend these courses.*

RECOMMENDATION 23 : *Teachers of intellectually handicapped and borderline handicapped children should be encouraged to obtain a recognised graduate qualification in special education. Graduate courses should contain theoretical and practical components and should be available to teachers in metropolitan and rural areas.*

RECOMMENDATION 24 : *After 31 December 1983 all new teachers appointed or recruited to work with handicapped children should have completed an appropriate graduate qualification in special education.*

RECOMMENDATION 25 : *After 31 December 1983 the allowance payable to teachers in special schools should be discontinued, and a new allowance should be paid only to special education teachers with an appropriate graduate qualification. This allowance should be paid to teachers in special classes and special schools.*

RECOMMENDATION 26 : *The promotion of teachers working in special education should depend on an appropriate graduate qualification and successful professional experience.*